11-443

No.

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In The

# Supreme Court of the United Siates

October Term, 1990

DANIEL R. HODGE, M.D.,

Petitioner,

VS.

LAKE SHORE HOSPITAL, INC., STAT SERVICES, INC., JOSEPH G. CARDAMONE, M.D., LYNN FELDMAN, D.O., JAMES B. FOSTER, C.E.O.,

Respondents.

# ON PETITION FOR WRIT OF CERTIORARI TO THE UNITED STATES COURT OF APPEALS FOR THE SECOND CIRCUIT

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August 10, 1991



# **QUESTIONS PRESENTED**

- 1. Whether racially motivated discriminatory intent by the Respondents Lake Shore Hospital et al., to deprive Petitioner, Daniel Hodge of a constitutionally protected intellectual property interest in his board-granted privilege to practice medicine can be proved by documentary evidence?
- 2. Whether the Respondents Lake Shore Hospital et al., in removing the Petitioner, Daniel Hodge without Procedural and Substantive Due Process from the Lake Shore Hospital Emergency Room physician's roster, contrary to the directive of its board, documentarily violated its bylaws and federal anti-discrimination, right-to-contract and conspiracy statutes?
- 3. Whether the district court in becoming a self-appointed "medical expert" for the Respondents and in making spurious procedural distinctions between "admissions," and in leaving a judgment open for almost three (3) years, merely to determine "punitive attorney's fees" against Petitioner, Daniel Hodge, and the circuit court's sanctioning of such conduct as allegedly being valid and "interlocutory" and the circuit court's sedulous evasion of jurisdictionally proper issues presented to it for resolution, was so far a departure from the accepted and usual course of judicial proceedings as to call for an exercise of this Court's supervision?
- 4. Whether policing of circuit courts should be done by a National Court, which can issue final binding decisions, and which could prevent this assortment of interminable injustice, even if certiorari review, having the usual precedential value, were not warranted?

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## In The

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DANIEL R. HODGE, M.D.,

VS.

Petitioner,

LAKE SHORE HOSPITAL, INC., STAT SERVICES, INC., JOSEPH G. CARDAMONE, M.D., LYNN FELDMAN, D.O., JAMES B. FOSTER, C.E.O.,

Respondents.

# ON PETITION FOR WRIT OF CERTIORARI TO THE UNITED STATES COURT OF APPEALS FOR THE SECOND CIRCUIT

Petitioner prays that a writ of certiorari be issued to review an order of the United States court of appeals for the second circuit filed on May 15, 1991, which affirmed the December 21, 1990 Judgment, the December 19, 1990 "final order" and the "interlocutory orders" of February 4, 1988 and February 17, 1988 on which the judgment was based in *Daniel R. Hodge, M.D. vs. Lake Shore Hospital Inc., et al.*, case # CIV-87-566C. The district court had withheld entry of judgment for almost 3 years purportedly to determine attorney's fees.

## **OPINIONS BELOW**

The Summary Order, Docket # 91 - 7063, of the United States court of appeals for the second circuit, filed May 15, 1991, is unpublished, and is reprinted in the Appendix to this Petition, (AP 1-2), infra. The December 21, 1991 Judgment (AP 3),

<sup>&</sup>lt;sup>1</sup> AP\* denotes the appendix attached to this Petition.

December 19, 1991 Decision and Order (AP 4-6) and the "interlocutory orders" of February 4, 1988 (AP 9-16) and February 17, 1988 (AP 17) of the United States district court for the western district of New York, case # CIV-87-566C, are unreported.

#### JURISDICTION

The Judgment of the Court of Appeals in *Daniel R. Hodge, M.D. vs. Lake Shore Hospital Inc., et al.,* was filed on May 15, 1991. This Court has jurisdiction to review that Judgment under 28 U.S.C. 1254 (1), Rule 10.1 and 13 of this Court.

### CONSTITUTIONAL PROVISIONS, STATUTES AND RULES INVOLVED

Are all set forth in pertinent part beginning at (AP 18-20)

#### STATEMENT OF THE CASE

On June 5, 1987 Petitioner, Daniel Hodge filed a suit in Federal district court (A 5-37),<sup>2</sup> for the western district of New York, against Respondent, Lake Shore Hospital after the hospital administrator Respondent, James B. Foster, C.E.O., and the previous year's (1986) Emergency Room Committee Chairman, Respondent, Joseph G. Cardamone, M.D., and the private Emergency Room physician service contractor, Respondent, Lynn Feldman, D.O., refused to comply with the wishes of the Lake Shore Hospital Board, (A 132-135) which had re-appointed Petitioner, Daniel Hodge to the hospital Medical and Emergency Room staff for 1987 and 1988.

The Complaint and Affidavit (A 5-37) with particularity, asserted in well-honed, precisional averments of and from a wide nucleus of operative facts, esoteric and arcane medical data and based on documentary evidence, that the Respondents unlawfully

The number(s) in the parentheses following the letter 'A' refer(s) to the page(s) where the proof is found, in the Appendix for the Appellant, in the court below.

and pretextually denied Petitioner, Daniel Hodge the right to contract his services as an Emergency Room physician in violation of 42 U.S.C. 1981 and in violation of Lake Shore Hospital bylaws, in a racist conspiracy, fulminatingly operating within and outside of the Lake Shore Hospital, in violation of 42 U.S.C. 1985 and 1986, and that the Respondents defamed the personal and professional reputation of Petitioner, Daniel Hodge, within and outside of Lake Shore Hospital, by making fraudulent and pseudo-scientific medical assessments of his professional performance, and causing Plaintiff-Appellant to suffer a loss of income and extreme emotional distress.

Respondent, James B. Foster, C.E.O., moved to dismiss (A 38-53) pursuant to F.R.C.P. Rule 12 (b)(6), Respondent, Joseph G. Cardamone, M.D., moved (A 54-83) for partial Summary Judgment pursuant to F.R.C.P. Rule 56 and to dismiss the Complaint in its entirety pursuant to F.R.C.P. Rule 12 (b)(6), as did Respondent, Lynn Feldman, D.O., who relied in part on the reply submission of Respondent, James B. Foster, C.E.O. The Respondents then proclaimed that "defendants presume that the factual allegations in the Complaint are true," admissions that were made "pursuant to their F.R.C.P. Rule 12 (b)(6) motion to dismiss." Based upon those vigorously proclaimed admissions and grounds, Petitioner, Daniel Hodge then cross-moved (A 84-161) for Summary Judgment pursuant to F.R.C.P. Rule 56.

On February 4, 1988, federal district court Judge John T. Curtin, who is not a physician, and without the benefit of "medical expert" opinion proclaimed that, "As described by the plaintiff himself, all of these disputes clearly originate from serious differences about proper medical treatment," dismissed the suit (AP 13) and awarded the Respondents sanctions against the Petitioner, Daniel Hodge pursuant to F.R.C.P. Rule 11, allegedly because Petitioner committed the unpardonable sin of equating operative factual admissions under F.R.C.P. Rule 12 (b)(6) and Rule 36 as being one and the same.

In a February 17, 1988, sua sponte, post-decision Order (AP 17), Federal district court Judge John T. Curtin proclaimed,

"The Court will withhold entry of judgment until after the question of attorney's fees is decided. If any party believes that

judgment shall be entered earlier, the Court shall be notified with the reasons for such entry." (emphasis supplied)

Thereupon, Petitioner, Daniel Hodge filed a Notice of Appeal (A 242) on February 19, 1988 and on March 2, 1988, submitted an Affidavit (A 244-264) specifying urgently why, as the Court had requested, "the reasons for such entry," were being required by the Plaintiff-Appellant in an early and most expeditious fashion, predicated on the propositions and grounds depicted in an Affidavit entitled in a most graphically descriptive way, as,

"Plaintiff's Affidavit in Support of Immediate Judgment, Further Severe Penalties and Fines Against the Plaintiff and for Even More Magnanimous Fees for the White Racist Defendants and Their Counsels and that the Court Then Recuse Itself Due to Its Conflict of Interest as Self-Appointed Medical Expert for the

Defendants." (emphasis supplied)

On April 20, 1988, the then-Chief-Judge, Wilfred Feinberg of the second circuit and, Judges Thomas J. Meskill and Lawrence W. Pierce, granted the Respondent Feldman's motion to dismiss the Appeal (AP 7-8) as being "premature" even in light of such seminal cases as Gillespie vs. United States Steel, 379 U.S. 148 (1964) [which held that a final decision does not necessarily mean the last order possible to be made in the case. but rather is a practical decision arrived at by a balancing of competing interests] and Sears, Roebuck & Co. vs. Mackey 351 U.S. 427 (1956), [express determination that there is no just reason for delay] to [direct the entry of a final judgment as to one or more but fewer than all of the claims of the parties] and Cohen vs. Beneficial Industrial Loan Corp 337 U.S. 541 (1949) [that small class which finally determine claims of right separable from, and collateral to, rights asserted in the action, too important to be denied review and too independent of the cause itself to require that appellate consideration be deferred until the whole case is adjudicated]

The Hodge vs. Lake Shore Hospital Inc., et al, dismissal

Judgment was kept <u>unentered</u>, solely to determine attorneys fees,<sup>3</sup> for almost three years, as a reasonably connected "balancing of interests" or was it kept unentered for some other <u>purpose</u>, like to prevent appeal altogether, banking of course, on

the Petitioner, Daniel Hodge, giving up?

On December 19, 1990, a "final order" was made and on December 21, 1990, Judgment was entered, with no mention by Judge Curtin or with no explanation by him of any kind whatsoever, of what had actually accounted for the lengthy "procedural interlocutory delay" and even then, what legal, social, economic, or scientific, most enigmatic and serendipitous event attended and had provoked, prompted, incited and suddenly compelled Judge Curtin, almost three years into the "withheld entry of judgment," era, to finally have it entered, and most certainly not - in accordance with F.R.C.P. Rule 1, that "just, speedy and inexpensive determination of every action," Rule. Petitioner, Daniel Hodge promptly re-Appealed that December 19, 1990, Hodge vs. Lake Shore Hospital Inc., et al., Decision, Order and Judgment on January 4, 1991.

The Petitioner, Daniel Hodge, under the guise of F.R.C.P. Rule 11, was fined \$ 2000 for fearlessly fighting corruption and

white-collar criminality.

<sup>&</sup>lt;sup>3</sup> Edward W. Keane, Esq., in Chapter 26 of the New York State Bar Associations, Federal Civil Practice, entitled Appellate Review, states the following with regard to "Final" Decisions:

<sup>[</sup>D]etermining whether and when a final judgment has been entered usually presents little difficulty. In a few circumstances, however, a judgment may be "final" and appealable even though potentially significant rulings have yet to be made, such as taxing costs, F.R.C.P. 58, awarding attorneys' fees, Budinich vs. Becton Dickinson & Co., 108 S. Ct. 1717 (1988), and determining the details of antitrust divestiture, Brown Shoe Co. vs. Unites States, 370 U.S. 294, 308-309 (1962). The guiding principle is that "a question remaining to be decided after an order ending the litigation on the merits does not prevent finality if its resolution will not alter the order or moot or revise decisions embodied in the order. Budinich vs. Becton Dickinson & Co., 108 S. Ct. at 1720.

The fact situation in *Hodge vs. Lake Shore Hospital Inc.*, is startlingly similar to *Budinich*, and most surely even falls well within the mélange - and in fact, doesn't even rise to the compelling levels of intensity of such venerable procedural powerhouses of \*finality\* as *Cohen*, *Sears*, and *Gillespie*.

The other pernicious consequence of the delayed and thus denied Justice, in the nearly three-year-long unentered judgment, is that during the intervening "dormant" period, the under color of law, conspiratorial and collusive New York State department of health's, office of professional medical conduct (OPMC)4 and private white-collar, covert activity, deception, misrepresentation. tampering with medical records, and pseudo-scientific fraud. being committed by the Respondents in conjunction with their attorneys and the New York State department of health, and which continues unabated, therefore, converted the court of appeals for the second circuit into a nisi prius forum, to hear additional and superfluous matters for the first time - supplying more evidence of the intensity and extensiveness of damages to the Petitioner and the documented increasing culpability of the Respondents - that could not by definition be considered in the district court, because the action had taken on a rather unusual design "in hibernation" during that procedural hiatal unappealable status of being "in between district and circuit court," for almost three years.

On May 15, 1991, United States court of appeals for the second circuit Judges, George C. Pratt, Roger J. Miner and Frank

The "positive scientific proof" purported precedential value and preclusive Res Judicata affect on the validity of Petitioner's claim of racial discrimination, conspiracy, and failing to stop a conspiracy to deprive a citizen of a constitutional right - whether or not certiorari is granted - is most cogent in this case. In Petitioner's Article 78 Proceeding, (prohibition, mandamus, certiorari action to review the official conduct of "body or public officers and aggregations of person") in the New York State supreme court, appellate division, third department, in Albany, N.Y., - and denied review before the State of New York court of appeals, and on its way to this Court - New York State attorney general, Robert Abrams, in a Brief for the Respondents, in Hodge vs. New York State Department of Education et al, prepared by assistant attorney general John J. O'Grady, Esq., advanced the preclusive defense, stating that, "Petitioner's further claims of racial discrimination and conspiracy were properly rejected be the Respondents where, as here, not only are the charges lacking any factual basis, the Federal courts dismissed similar claims. Hodge vs. Lake Shore Hospital et al., 87 Civ. 566 C (W.D.N.Y. Feb 4, 1988) (Curtin, J.); Hodge vs. Kelly et al., 86 Civ. 160 C (W.D.N.Y. July 8, 1988) (Curtin, J.), aff'd 868 F. 2d 1267 (2d Cir. 1988) cert. den. 490 U.S. 1081, 104 L. Ed 2d 663 (1989)."

X. Altimari, while pretending during oral argument to be, oh so objective (AP 26-34), nevertheless, affirmed the December 21. 1990 Judgment and the so-called "interlocutory orders" of February 4, 1988 and February 17, 1988 - allegedly held open and the Judgment kept unentered for almost three years solely to determine a "punitive F.R.C.P. Rule 11," \$ 2000 in attorney's fees - and said they, "on which the final judgment was based in part," most casually in the unusual procedural course of Justice. And moreover, these second circuit appeals court Judges proffered as justification for their and the district court's extreme departure from the usual course of judicial proceedings in the federal court system, in not protecting the Petitioner's constitutional, intellectual property, hospital privileges and contract rights, even after such blatantly obvious, documentary racial discrimination in violation of 42 U.S.C. 1981, that, "Plaintiff's state claims were not specifically developed in the district court, are not part of the action, and therefore are not before us." (AP 2)

Petitioner, Daniel R. Hodge, M.D., J.D., is a 47 year-old Black physician, licensed to practice medicine in New York State since 1978, who worked as a clinical physician at Attica Prison, in Wyoming, New York and as a locum tenens Emergency Room physician at various hospitals in the western New York area, including Respondent Lake Shore Hospital, and who completed Law School in August of 1988.

Beginning in early 1987, Petitioner, Daniel Hodge was abruptly dropped from the Emergency Room physician's roster at Respondent Lake Shore Hospital, in Irving, New York.

The president of the Lake Shore Hospital board of directors, Russell Newman, had written to the Petitioner on January 12, 1987, (A 135) announcing that on December 23, 1986, (A 134) Delmar Brinkman chairman of the board, had renewed the Petitioner, Daniel Hodge's Emergency department privileges. The letter stated in part,

"Your participation during 1985 and 1986 in the activities of the Medical Staff has contributed greatly to the success of Lake Shore Hospital. On behalf of the Board of Directors, I wish to thank you and to inform you that the Board has approved

your reappointment to the Medical Staff for 1987 and 1988 on the Emergency Services Staff.

Privileges are granted as specified in the delineation form

which is attached for your information." 5

Respondent Lake Shore Hospital's bylaws embodied principles of Procedural Fair Process to which all those professionally competent physicians continuously meeting the hospital's qualifications, standards and requirements, and having the privilege of membership on the medical staff (A 189-200) are entitled. Article VII, section 1(b) (A 190) of the Lake Shore Hospital bylaws, most specifically provides that,

"Whenever the corrective action could be a reduction or suspension of clinical privileges, the medical executive committee shall immediately appoint an ad hoc committee to investigate the

matter."

In Article VII, section 1(c) the Lake Shore Hospital bylaws further most articulately provide that,

"Within ten (10) days after the receipt of the request for corrective action, the ad hoc committee shall make a report of its investigation to the medical executive committee. Prior to the making of such report, the physician against whom corrective action has been requested, shall have an opportunity for interview, he shall be informed of the general nature of the charges against him, and shall be invited to discuss, explain or refute them. This interview shall not constitute a hearing, shall be preliminary in nature, and none of the procedural rules provided in these bylaws with respect to hearings shall apply thereto. A record of such interview shall be made by the ad hoc committee and included with its report to the medical executive

Skin & subcutaneous tissue, Repair of minor lacerations, Uncomplicated deep wound closure. Local infiltration, Regional block, simple.

Placement of vena caval catheter [also known as insertion of a Central Venous Pressure (CVP) line].

Anesthesia: Internal Medicine:

On the delineation of privileges form, which specified various medical and surgical skills that the grantee physician, Dr. Hodge, was granted privileges to perform at Lake Shore Hospital, the Chairman of the Board, Delmar Brinkman, had signed twice, respectively above the dates 9-7-84 and 12-23-86, signifying that those delineated privileges, and constitutionally protected Intellectual Property, were renewed by the grantor, Lake Shore Hospital on those two dates and occasions. Of particular importance in this action were Petitioner Dr. Hodge's delineation of privileges in the following areas:

Surgery: Skin & subcutaneous tissue, Repair of minor

committee."

No where in any part of any record in the hospital or in this proceeding is there to be found "an ad hoc committee report of a corrective action interview," nor nowhere in any record anywhere is there evidence that the medical executive committee of Lake Shore Hospital appointed an ad hoc committee to conduct a preliminary interview with Petitioner, Daniel Hodge. No where! In fact, Respondent James B. Foster (A 166-168) in his Affidavit in Opposition to the Petitioner's Cross-Motion for Summary Judgment, sworn to on September 10th, 1987, in paragraph 5, sheds much light on the subject of "an ad hoc committee report of a corrective action interview," because Mr. Foster blandly admits, among other things, that there was none as he proclaims,

"The hospital's bylaws provide for a 'hearing' and 'due process' protections when 'corrective action' has been requested, privileges restricted or membership on the medical staff affected. (Articles VII and VIII). No 'corrective action' has been requested, privileges restricted or membership on the medical staff affected by the hospital regarding Dr. Hodge, and therefore, Dr. Hodge was not entitled to the 'due process' protections of the hospital

bylaws."

But that "official proclamation," although inaccurately characterizing Dr. Hodge as not being, "entitled to the 'due process' protections of the hospital bylaws," which clearly every member of the medical staff is "entitled" to, although they may never need to utilize that "entitlement," the Foster "official proclamation," also did not comport with the reality of the stark documentary evidence (A 161) that Lake Shore Hospital Emergency Room physician's roster revised on January 13, 1987. revealed that the name of Petitioner, Daniel Hodge was dropped, only one day after the Lake Shore Hospital board of directors, in its January 12, 1987 letter, announced and concluded that Dr. Hodge had, "contributed greatly to the success of Lake Shore Hospital," (A 135) and showed its thankfulness and appreciation for Dr. Hodge's great contribution and heartily reappointed Dr. Hodge to the Medical and Emergency services staff for not only 1987, but for 1988 as well.

And Respondent, James B. Foster's Summary Judgment

quality re-admission in paragraph 7 (A 167) of his Affidavit in Opposition to the Petitioner's Cross-Motion for Summary Judgment, sworn to on September 10th, 1987, Mr. Foster again reveals the reason that the Petitioner, Daniel Hodge was dropped from the Lake Shore Hospital Emergency Room physician's roster, because,

"As Dr. Hodge points out through his Complaint, Affidavit and Memorandum of Law, he was involved in substantial controversy with Defendants because of his manner of treatment, not because of his race. For example, at page eight of his own Memorandum of Law, he states that the treatment of the various patients described in his papers, 'figured heavily . . . in the Defendants' decision to drop the Plaintiff."

In paragraph 5 - "No we didn't restrict or deny membership," - then in paragraph 7 - "We dropped him, but not because of race, but because of how he treated patients." The operative fact is that Petitioner, Daniel Hodge was dropped. The proffered reasons for dropping him were wholly irrelevant and immaterial to the ultimate issue of being dropped without either "Procedural or Substantive Due Process," because regardless of whatever those reasons might have been, the hospital bylaws mandate in Article VII, section 1(c) that,

"the physician against whom corrective action has been requested, shall have an opportunity for interview, he shall be informed of the general nature of the charges against him, and shall be invited to discuss, explain or refute them."

The Lake Shore Hospital executive committee, on December 31, 1985 had imposed co-management temporary restrictions on a white physician, the President of the Lake Shore Hospital Medical and Emergency staff, Dr. D. Douglas Gilbert, D.O.'s privilege to admit patients to the Intensive Care Unit (ICU), with which he even then refused to comply. On April 4, 1986 the ICU committee made a decision to completely suspend Dr. D. Douglas Gilbert, D.O.'s privilege to admit patients to the Intensive Care Unit (ICU). On April 30, 1986 the Lake Shore Hospital board of directors ordered a temporary suspension of Dr. D. Douglas Gilbert, D.O.'s privilege to perform the, "insertion of central venous pressure (CVP) lines," and continued the Intensive Care Unit (ICU) admission suspension, and required

that all of Dr. D. Douglas Gilbert, D.O.'s admissions to the Lake

Shore Hospital must be sponsored.

Those restrictions and suspensions of the privileges of Dr. D. Douglas Gilbert, D.O., were "corrective actions" instituted by the Medical executive committee, pursuant to Article VII, section 1 and 2, of the Lake Shore Hospital bylaws, in a "Due Process" Fair Hearing, and by agreement of the parties to the dispute. Dr. D. Douglas Gilbert, D.O., despite his medical competency woes, he being white, was of course, allowed to contract his services to Lake Shore Hospital and to work in its Emergency Room, while the Black Petitioner, Daniel Hodge, who had no restrictions whatsoever on his delineated privileges, was nevertheless, removed from the Lake Shore Hospital Emergency Room physician's (A 161) roster, under malicious pretextual guises. having no medical merit whatsoever, and even then, without even as much as a Notice, as the bylaws mandate. This is documentary evidence of the most reprehensible form of raw white racism, if there ever was a more atrocious example.

Dr. D. Douglas Gilbert, D.O., was treated in a manner consistent with the aims of the principles of **Procedural Fair Process**<sup>6</sup> to which all those professionally competent physicians

FROM: SUBJECT: James B. Foster, Administrator Privileges of Dr. D Douglas Gilbert

DATE:

November 29, 1988

This is to advise you that the temporary restrictions placed on Dr. D Douglas Gilbert in April of 1986 have been revised as follows:

The suspensions and restrictions on Dr. Gilbert's privileges were again later modified as follows:

Dr. Gilbert may admit to ICU, but only with co-management by another appropriate physician. The co-management requirement will be reviewed at the end of six months by the Credentials Committee.

The CVP line restrictions will continue until he has performed, under the supervision of a co-management physician, five (5) cases with appropriate documentation.

Dr. Gilbert's name remained on the Lake Shore Hospital Emergency (continued...)

continuously meeting the hospital's qualifications, standards and requirements, and having the privilege of membership on the Medical staff (A 189-200) are entitled and specifically in Dr. Gilbert's case, it was the "corrective action," pursuant to Article VII, section 1(b) (A 190) and Article VIII, section 2 (a) (A 193) of the Lake Shore Hospital bylaws.

Petitioner, Daniel Hodge of whom the Lake Shore Hospital board of directors, in its January 12, 1987 letter, concluded that Dr. Hodge had, "contributed greatly to the success of Lake Shore Hospital," in 1985 and 1986 (A 135) and reappointed and renewed his privileges, for 1987 and 1988, including among other privileges, placement of Central Venous Pressure (CVP) lines, (A 134) has demonstrated by competent evidence that there was, in fact, disparate treatment of the Petitioner, Daniel Hodge relative to a similarly situated white person, Dr. D. Douglas Gilbert, D.O., who even by virtue of the "corrective action," entitlement pursuant to Article VII, section 1(b) (A 190) of the Lake Shore Hospital bylaws, had suspensions and restrictions placed on his privileges in December of 1985 and April of 1986, because of his incompetence, but who could nevertheless, continue to be president of the Medical staff and work in the Emergency Room, while Petitioner, Daniel Hodge, a most knowledgeable, competent and experienced Black physician,

Respondents became convinced that the unentered Judge Curtin, Judgment was in essence and as a practical matter, the end of the 'dessert storm" and that Respondents' racially disparate treatment "operations" could resume as usual. Respondent, James B. Foster, C.E.O., sometime after the dismissal of the action, even unsolicitously boasted about how he knew what

he was doing when he, "got rid of that Dr. Hodge."

<sup>6(...</sup>continued)

Room schedule even after the Action was commenced in June 1987 because Petitioner, Daniel Hodge carefully did not mention his name and alleged only that "white attendings" had Due Process. Although Dr. Gilbert was on the Emergency Room schedule on September 3, 1987, when Petitioner cross-moved for Summary Judgment and gave the initials of three white physicians alleged to have had Due Process in the handling of their either denial or reduction of privileges, Dr. Gilbert's name disappeared from the schedule all during 1988, the most classic evidence of guilt. Dr. Gilbert's name again appeared on the Lake Shore Hospital Emergency Room schedule February and December 1989, all of 1990 and 1991 to date.

was dropped (A 161) from the Lake Shore Hospital Emergency Room physician's roster, contrary to the recommendation of the Lake Shore Hospital board.

And for a period of six months - from January to June 1987 - Petitioner, Daniel Hodge, could not reason with or (A 145) persuade<sup>7</sup> the Respondents, Cardamone, Feldman and Foster or Lake Shore Hospital board to honor the terms of the

board's directive and reappointment.

Respondents, Joseph G. Cardamone, M.D., Lynn Feldman, D.O., and James B. Foster, C.E.O., then not even carefully - it isn't at all perceived as essential - pretextually orchestrated a series of contrived and convoluted justifications for the three-some's collective actions, using fraudulent (A 138,139,141,144) post-termination creations, and ex post facto, pseudo-scientific inventions, i.e., "advisory notices" which were made in March 1987 and were "inadvertently not sent to you following the late November Emergency Department meeting" (A 139). These were the memoranda which were used, to nunc pro tunc, concretize various alleged models of medical malfeasance and "mispractices," purported to have been committed by the Petitioner, Daniel Hodge in contradiction to - and this is the most heinous aspersion - their ill-educated, provincial perceptions of what is "the generally accepted standard of practice, of public relations

"This physician has determined, based on a review of the medical record and by informed and clinically well-experienced judgment, that the treatment afforded John Weeks, was not only appropriate but exemplary in that setting and under those sets of facts and circumstances.

Concern about infection was a distant second and even that was appropriately treated with 1 gram of prophylactic Cefazolin and admission.

In a most implacable and resolute communiqué (A 145) sent on April 24, 1987 to the Lake Shore Hospital Emergency Room committee chairman, Petitioner, Daniel Hodge declared, among other things, that,

The outcome approaches that of a modern medical miracle because the primary and sole consideration of concern to this physician at that time was to assure viability of his virtually dismembered left great toe, which was bearly [sic] hanging on a thread with a minuscule blood supply in the papillary and reticular dermis perhaps.

I expect to be placed back on my regularly scheduled Saturday time slot starting June 1987, if indeed this adverse review was the reason for my discontinuance abruptly without even the courtesy of notice."

oriented, 'showbizz' medicine," which is in diametric and radical tension to the forthrightness of nature, and is a bit too harsh for City or even Country manners, defying even common sense.

The fraudulent (A 141 and 144) post-termination creations and ex post facto, pseudo-scientific inventions, even on their face, provide documentary proof that the allegations of "incompetence" being levelled against Petitioner, Daniel Hodge, by Respondent, Joseph G. Cardamone, M.D., were the machinations of a royal, pseudo-scientific hoax, because they were inconsistent with documentary contradictory assertions in a September 26, 1986 "complaint-letter," made and sent by Respondent Joseph G. Cardamone, M.D., from himself as a "complaining" consultant, to himself as, "medical performance evaluator," and chairman of the Emergency Room committee.

Several months before the need to justify their actions in removing the Petitioner, Daniel Hodge's name from the Lake Shore Hospital Emergency Room physician's roster, Respondent, Joseph G. Cardamone, M.D., had most graphically described his own clinical findings (A 142-143) as he had observed on September 26, 1986 and which he recorded in a September 27, 1986 consultation report sent to Dr. Velez, a surgeon. The consultation report, made by Respondent, Joseph G. Cardamone, M.D., described a 15 year-old white male patient (A 140), who had sustained a virtually severed left great toe, in a dirt-bike accident.

In Respondent, Joseph G. Cardamone, M.D's consultation report to Dr. Velez, the surgeon, dated September 27, 1986, Respondent, Joseph G. Cardamone, M.D., divulged that during his September 26, 1986 "examination and evaluation of the clinical findings," with regard to the 15 year-old white male patient's toe injury, Respondent, Joseph G. Cardamone, M.D., as a medical specialty sleuth, uncovered facts about the toe, that among other things, in a wholly different and even complimentary light, revealed that,

"He does have good capillary filling of the toe . . . The laceration appears clean with some superficial skin necrosis along the edge." (A 142)

However, in Respondent, Joseph G. Cardamone, M.D's

allegedly same-day, "simultaneously constructed," on September 26, 1986, from himself to himself, "complaint-letter," (A 141) and desultory philippic, on several fronts, attacking Petitioner, Daniel Hodge's professional competency, performance and insubordination, Respondent, Joseph G. Cardamone, M.D., self-servingly exhorted and opined, to himself,

"Dear Dr. Cardamone:

John Weeks was examined in the Emergency Room by Dr. Hodge after a dirt bike accident. The toe had very severe injuries. Dr. Hodge took it upon himself to repair this in the Emergency Room. The results of the repair are certainly less than optimal. At present time it is necessary that John have additional surgery on his toe. I feel that this should have been evaluated by someone more conversant with the severe injury that he had to his toe and taken care of appropriately at the time of his arrival in the Emergency Room rather than at a later date." (emphasis supplied)

Upon careful analysis of a memorandum (A 144) purportedly made on December 2, 1986 from Respondent, Joseph G. Cardamone, M.D., chairman of the Emergency Room committee to Petitioner, Daniel Hodge, regarding the 15 year-old white male patient, with the virtually severed left great toe, 8 it is

Two factors - one medical, one legal - documentarily support Petitioner, Daniel Hodge's contention that the adverse professional evaluation, was a pseudo-scientific and fraudulent pretext being used after the fact to justify the Respondents' unlawful removal of the Petitioner on January 13, 1987, from the Emergency Room physician's roster.

First, medically, in the Churchill Livingston publication entitled, "Amputation Surgery And Rehabilitation: The Toronto Experience," on page 148, with regard to the "Indications for Amputation," the following account is made:

Amputations in acute injuries of the hand are very often a "fait accompli," and replantation is either impossible or unjustified. In such cases, the surgical decision is not whether but where to amputate. The same applies to those cases in which the digit or part of it [sic, is] still attached but badly damaged and avascular. The difficulties in deciding upon whether or not to amputate occur with patients who have a badly damaged but viable digit. Is primary amputation in such cases the best treatment? There are no rules. One can use certain guidelines, but the decision on whether or not to amputate must be made for each individual patient. A conservative

clear that the "incompetent performance evaluation," of the Petitioner, Daniel Hodge, by Respondent, Joseph G. Cardamone, M.D., was in a mercurial switch in tone, concocted after-the-fact in March of 1987, so as to "justify" the fait accompli, previously planned removal of Petitioner, Daniel Hodge, from the Lake Shore Hospital Emergency Room physician's roster (A 161) on January 13, 1987.

Even then, the "incompetent performance evaluation," purportedly designed to, "prevent future improper treatment of a certain type of injury," had resulted in a silent dismissal, on January 13, 1987, of the Petitioner, Daniel Hodge by inference, with not even as much as Notice and an opportunity to be heard, in keeping with the Due Process provisions of Respondent Lake Shore Hospital's bylaws (A 189-200), and moreover, a dismissal that was clearly contrary to the expressed directive and wish of

Respondents have been professing innocence of any conspiratorial activities detrimental to Petitioner, Daniel Hodge's personal, and professional reputation and practice privileges at Lake Shore Hospital or applications for privileges at any other hospitals (A 148-159) and furthermore, asserting that their internal professional evaluations had no ill affects at Lake Shore

the Lake Shore Hospital board, which had renewed (A 135) Petitioner, Daniel Hodge's privileges (A 134) for 1987 and 1988.

approach with preservation of the injured digit, is justified in the following situations. (emphasis supplied) (See A 147 for the 5 situations) [Respondents admitted these medical facts in their FRCP 12 (b)(6) motions]

<sup>8(...</sup>continued)

Secondly, legally, Petitioner, contrary to Respondent Joseph G. Cardamone's accusation, did not take it upon himself, but sought the advice and direction of the surgeon, Dr. Velez, whom Respondents admit (A 32) [pursuant to FRCP 12 (b)(6)] had recommended amputating the toe and creating a stump. Dr. Velez was not at the scene to be able to personally assess a clinical situation for which, "There are no Rules," and where the decision of whether or not to perform a primary amputation must be made with each individual patient. Furthermore, the medical literature supports a conservative approach with - if at all possible - preservation of the injured digit [or toe]. Respondents' purported justification for the, "incompetent performance evaluation," was and is documentarily demonstrated here to have been pretextual, and medically and legally to be pseudo-scientific fraud.

Hospital, despite the deletion of the name of the Petitioner, Daniel Hodge from the Lake Shore Emergency Room physician's roster (A 161), and moreover, that such internal evaluations, pursuant to its bylaws, Article VI, section 1 (b) and (c), still have no bearing on the actions of other hospitals (A 148-159) in denying Petitioner, Daniel Hodge privileges to practice elsewhere.

On November 6, 1987, Petitioner, Daniel Hodge, was suspended - for the second time in the *Hodge vs. Kelly et al.*, cert. den. 490 U.S. 1081 (1989) controversy - without pay from employment as a clinical physician at Attica Prison, after having been placed on "administrative leave with pay" nine months before, on March 16, 1987, pending the investigation of alleged "medical misconduct" with regard to the resuscitation of an inmate. The Attica Prison local management team and their Albany-based, even more corrupt directors, called in the New York State department of health's, office of professional medical conduct (OPMC), Health Commissioner Axelrod's corrupt

The Lake Shore Hospital bylaws in Article VI, section 1 (b) and (c) provide with regard to clinical privileges restricted, that:

<sup>(</sup>b) Every initial application for staff appointment must contain a request for the specific clinical privileges desired by the applicant. The evaluation of such request shall be based upon the applicant's education, training, experience, demonstrated competence, references and other relevant information, including an appraisal by an appropriate department chairman, if necessary. The applicant shall have the burden of establishing his qualifications and competency in the clinical privileges he requests.

<sup>(</sup>c) Periodic redeterminations of clinical privileges and the increase or curtailment of same shall be based upon review of records of patients treated in this or other hospitals and review of the records of the Medical staff which document cvaluation of the member's participation in the delivery of medical care and, when necessary, direct observation by appropriate appointed staff members, of care provided. (emphasis supplied)

For those reasons, Respondent, Joseph G. Cardamone, M.D's "from-himself-to-himself," white racist, pseudo-scientific, fraudulent evaluation of Petitioner, and documented - personal involvement in this widespread criminal conspiracy - must be forthwith expunged from the professional performance evaluation file of Petitioner, Daniel Hodge. The issue is not that Respondent, Joseph G. Cardamone, M.D., is guilty as claimed but rather how extensive and intensive is his guilt and how intensive and extensive is the damage that all the Respondents directly and indirectly caused, and to this very moment still continue to cause to the Petitioner, Daniel Hodge?

machine, to conjure-up twenty (20) so-called "substantive charges" and "sub-charges" of "medical misconduct," categorized in six (6) so-called "specifications," aimed at unjustifiably effecting the revocation of Petitioner, Daniel Hodge's license to practice medicine in New York State, in a malicious prosecution for more than three years, during that "in hibernation" procedural hiatal unappealable status of being "in between district and circuit court."

The New York State department of health's, office of professional medical conduct (OPMC), in the persona of the late Paul R. White, Esq., 10 made rounds at several hospitals where

New York State department of health, associate counsel for the office of professional medical conduct (OPMC) was killed in an auto accident on August 2, 1990. The late Mr. White had prepared, allegedly pursuant to Public Health Law, Section 230, Education Law, Section 6509 and the State Administrative Procedure Act, Article 3, the so-called statement of charges containing the twenty (20) alleged cases of \*medical misconduct\* against the Petitioner, Daniel Hodge and prosecuted the case from May 26, 1988 until May 12, 1989.

Mr. White also carried out a so-called investigative hearing because Petitioner allegedly gave the OPMC \*reason to believe that he [Petitioner, Daniel Hodge] may be affected by mental disability,\* because of pictures, parodies, satirical essays and vignettes created by Petitioner, Daniel Hodge and being used to lawfully, in keeping with the First Amendment of the Constitution of the United States of America, fight Institutionalized White Racism.

The late Mr. Paul R. White, Esq., criminally altered or destroyed portions of three medical charts in order to support his case against this Petitioner. The documentary evidence against Mr. White is irrefutable and New York State's defense depends on an event - the removal of only the Emergency Room chart, consisting of a single page, from a collection of 70 other pages in a Patient's (L) medical record - with probabilistic odds that are incredulously unlikely to have spontaneously occurred, during the chain of custody, either in the copying process or record certification procedure or mailing. Mr White, a Disciplinary Rule violating, megalomaniacal psychopath, as well as a rifraffin' criminal fraud, could have been sentenced - had he lived - to the federal penitentiary for at least 10 years and fined \$ 250,000.00 for tampering with a victim, Petitioner, Daniel Hodge in violation of 18 U.S.C. 1512, for the willful and intentional withholding and concealing of medical records in a conspiracy with the Respondents, from availability for use in an official proceeding, and to support a fabricated charge against Petitioner of having 'missed a diagnosis of bronchopneumonia," when that was the "discharge diagnosis" and the "admission diagnosis" was "asthmatic bronchitis," which was given to the patient by the Emergency Room physician, Dr. Campbell, at WCA Hospital - the (continued...)

Petitioner, Daniel Hodge worked as a locum tenens Emergency Room physician and collected various alleged acts of "medical misconduct," gathering five (5) of those so-called "substantive charges" and "sub-charges" of "medical misconduct," in collusion with (A 110, 111, 113) and at Lake Shore Hospital, to wit: (Patient A, an 18 year-old asthmatic malingerer [A 14-24,95,96,136,137]; Patient B, a 15 year-old young man with a virtually dismembered great left toe [A 31-34;140]; Patient M, a 2 year-old infant with a febrile seizure; Patient S, an alleged "thrombophlebitis" [inflammation of the leg veins] case; and Patient L, an asthmatic with bronchitis.

REASONS FOR GRANTING CERTIORARI
POINT I: The Supreme Court Of The United States Must
Again Declare That Racially Motivated Discriminatory
Intent By The Respondents Lake Shore Hospital et al., To
Deprive Petitioner, Daniel Hodge Of A Constitutionally
Protected Intellectual Property Interest In His BoardGranted Privilege To Practice Medicine Can Be Proved By
Documentary Evidence.

It's documentary! The Lake Shore Hospital board of directors, in its January 12, 1987 letter, announced and concluded that Dr. Hodge had, "contributed greatly to the success of Lake Shore Hospital," (A 135) in 1985 and 1986, and showed its gratitude, thankfulness and appreciation for Dr. Hodge's great contribution by heartily reappointing Dr. Hodge to the Medical and Emergency services staff for not only 1987, but for 1988 as well: A Constitutionally Guaranteed Privilege-To-Practice Biannual Prize. Board of Regents vs. Roth, 408 U.S. 593 (1972); Perry vs. Sinderman, 408 U.S. 593 (1972) It is indeed

<sup>10(...</sup>continued)

identical diagnosis that Petitioner, Daniel Hodge, had given the patient some 12 hours earlier at Lake Shore Hospital. With the missing WCA Hospital Emergency Room chart, the fabricated charge would stick, but with the WCA Hospital Emergency Room chart present, the charge was a ludicrous assertion. It was dual pseudo-scientific and conventional fraud! The Respondents were the original source of the charge, in their retaliatory effort to totally destroy Petitioner's medical career. The Respondents are heading for some jail time soon.

a most valuable constitutionally protected, personal Intellectual Property Interest. 42 U.S.C. 1982. But merely one day later on January 13, 1987, the three malicious Respondents, Cardamone, Feldman and Foster, with racist animus, (A 161) did otherwise! The Respondent Lake Shore Hospital board said YES! And the Respondents Cardamone, Feldman and Foster, said NO! How should this Court rule?

Should this Court documentarily - as even an eight-year old child could know and appreciate - find and summarily conclude, that the Lake Shore Hospital board of directors reappointed Dr. Hodge to the Medical and Emergency services staff for not only 1987, but for 1988 as well? (Review p. 7-8 of this Petition)

Petitioner, Daniel Hodge must, therefore, be granted Summary Judgment as a matter of law on his claim of having been denied his constitutionally protected Intellectual Property Interest, Privilege-To-Practice, in violation of the Lake Shore Hospital bylaws and contrary to the directive (A 135) of the Lake Shore Hospital Board. Celotex Corp. vs. Catrett, 477 U.S. 317 (1986); Matsushita Elec. Indus. Co., Ltd. vs. Zenith Radio Corp., 475 U.S. 574 (1986); Anderson vs. Liberty Lobby, Inc., 477 U.S. 242 (1986).

Was the documentary removal of Petitioner's name from the Emergency Room physician's roster an intentional act? Was it perhaps merely a clerical error? Or was it merely a phenomenon-a-nature that just spontaneously happens in scientific, democratic America to dark skinned people? The Respondents Cardamone, Feldman were asked for six long months to justify or reinstate. They absolutely refused to reinstate, (A 145) [Review footnote 7, p. 13 of this Petition] and proffered that such refusal was justifiably for cause, namely, because of "legitimate" claims against Petitioner, of medical misconduct and/or incompetence, which in fact were legally and scientifically totally bogus. Since the claimed misconduct and/or incompetence, were in reality scientifically fraudulent accusations against the Petitioner, then, is that bogus effort to harm the Petitioner, only additional and substantial evidence of unlawful

**intent** to deny Petitioner a constitutionally protected property interest?

It is well established that an intentional discriminatory act in the employment context, may be proved by circumstantial evidence, such as a pattern of conduct by an employer which is unexplainable on ground's other than race. Domingo vs. New England Fish Co., C.A. Wash. 1984, 727 F. 2d 1429 (1987) Can a document or a series of documents provide a similar or perhaps more compelling basis for concluding that an act of employment discrimination or refusal to implement the benefits of hospital privileges was intentional? This Court must declare that discriminatory intent in the employment context, can be proved and established by documentary evidence.

POINT II: The Respondents Lake Shore Hospital et al., In Removing The Petitioner, Daniel Hodge - Without Procedural And Substantive Due Process - From The Lake Shore Emergency Room Physician's Roster, Contrary To Directive Of Their Board, Documentarily Violated Their Bylaws And Federal Anti-Discrimination, Right-To-Contract

And Conspiracy Statutes.

Even if this Petitioner were white, Lake Shore Hospital would be still just as liable for having violated several provisions of its bylaws. The Lake Shore Hospital board has not to this very nanosecond officially or otherwise rescinded its 1987 - 1988 grant of privileges to practice medicine to the Petitioner, Daniel Hodge; so, why is Petitioner, Daniel Hodge not practicing at Lake Shore Hospital? Petitioner is still waiting to be put back on the Emergency physicians roster. For the same reasons advanced in POINT I, documentary evidence established unlawful intent by the Respondents in violating their bylaws and federal anti-discrimination, right-to-contract and conspiracy statutes.

POINT III: The District Court In Becoming A Self-Appointed "Medical Expert" For The Respondents And In Making Spurious Procedural Distinctions Between "Admissions" And In Leaving A Judgment Open For Almost Three (3) Years, Merely To Determine "Punitive Attorney's Fees" Against Petitioner, Daniel Hodge, And The Circuit Court's Sanctioning Of Such Conduct As Allegedly Being

Valid And "Interlocutory" And, The Circuit Court's Sedulous Evasion Of Jurisdictionally Proper Issues Presented To It For Resolution, Was So Far A Departure From The Accepted And Usual Course Of Judicial Proceedings As To Call For An Exercise Of This Court's Supervision.

A physician who treats a hysterical hyperventilating asthmatic, having not even a wheeze clinically, with hypoxemiainducing bronchodilators like epinephrine and aminophylline, and thereby cause a precipitous drop in the arterial partial pressure of oxygen in the patient's blood, from a level which is above the normal value of 85-95 millimeters of mercury, to a value (A 137) of 66 millimeters of mercury - is committing malpractice! Federal district court Judge John T. Curtin cannot refute that because Judge Curtin - despite all his "noble" attempts to justify and cover-up blatant unlawful racism - is not a Pulmonologist, 11 Petitioner was counselled and reprimanded

Drug Tested	Total	Arterial Before		Authors
Adrenaline SC	9	46	36	Adrenaline in Bronchial Asthma, Rees, H.A., Miller J, Donald K, W., Lancet, Vol. 2, p. 1164- 1167. (1967).
Aminophylline IV	9	58	50	Aminophylline in Bronchial Asthma, Rees H.A. et. al., Lancet, Vol. 2, p. 1167-1169, (1967).

The Court should notice that this is not new technology; it's a quarter of a century old. The Court should notice just the numbers representing the oxygen level (Arterial PO2, pronounced 'Pee Oh Two'), even if the Court does (continued...)

Listed here again, are the Best Evidence scientific facts material and necessary to proving that the Respondents' proffered reasons for removing Petitioner from the Lake Shore Hospital Emergency Room physician's roster was pretextual. This scientific Best Evidence, presented here and now, is the medically valid reason for not treating a hysterically hyperventilating asthmatic with either epinephrine or aminophylline to cause bronchodilator-induced hypoxemia, as shown by data presented even almost 25 years ago, by knowledgeable scientists and reported in a very reputable scientific Journal.

Severe asthma: Arterial PO<sub>2</sub> after Bronchodilators.

Individual values in the most hypoxic patient of each series.

about this "asthmatic patient" incident, and a white doctor who actually treated - and committed malpractice, was perceived to be doing the right thing, by the provincial medical community. This Petitioner has never been and will never be part of that assortment of "show bizz" medicine, so as to please patients or parents or nurses or doctors or administrators or boards of directors, when such conduct is scientifically insupportable, in fact, "High Tech" fraud and malpractice. That is the way it shall be, as far as this Petitioner is concerned, whether this Court or those below fail to understand or appreciate such personal and professional dedication to that which is scientifically, ethically, morally - and most importantly, legally right. Much to the chagrin of scientists, engineers have traditionally tended not to worry about how something worked - so long as it worked. But specificity and thus efficiency too often suffers as a result. There are scientific physicians - like this Petitioner, who know that every why hath a wherefore - and there are engineering physicians, who are routine oriented, and sometimes - too often in fact - merely glorified technicians, who sometimes get absolutely lost when inevitably something goes wrong, or varies

not understand the medical significance; it is obvious that the arterial oxygen level (Arterial PO<sub>2</sub>), in the blood <u>before</u> treatment with the drugs listed on the extreme left column were 46 and 58 and that <u>after</u> treatment the oxygen level

(Arterial PO2), dropped to 36 and 50, respectively.

If the Respondents didn't have a scientifically legitimate reason for their accusations of Petitioner's alleged professional incompetence, with regard to the asthmatic, then their motivations and intentions, as demonstrated here by Petitioner, were pretextual, discriminatory and unlawful. The "High Technology" of Black Oppression must not, in a scientific democracy, be allowed to replace the persistent & pervasive, old fashioned, reprehensible, incidents & badges of slavery and racial discrimination of present and past ages.

<sup>11(...</sup>continued)

The phenomenon is called bronchodilator-induced hypoxemia. It is an adverse side affect of these drugs and must, as always, be weighed against the benefits accruing to the patient. There was absolutely no benefit whatsoever to treating a hyperventilating patient when her oxygen level was probably way above normal, at perhaps 102, when the normal value is 85-95. It would be, in fact, detrimental to the patient and inexcusable malpractice! Such treatment has been linked to increased asthma deaths. Regular Inhaled Beta-Agonist Treatment in Bronchial Asthma, Malcolm R. Sears et al., December 8, 1990, Lancet, Vol. 336 p. 1391-1396.

significantly from the expected and routine path.

Let this Court hope and pray that should any of its members need critical care, that at that very moment, there is an adamant, argumentative, scientific, Dr. Daniel Hodge-type in the Emergency Room - who will tell an ill-educated, protocoloriented-airhead nurse or doctor to take a coffee break - rather than, despite the detriment to a patient member of this Court, go along with a routine - and non-individualized, and possibly improper and unscientific - diagnostic and treatment plan. Scientific fraud, which to be sure, is a bit harder to uncover (it takes a cogent knowledge of science, "commitment, . . . terribly hard work, and competence," and perhaps the aid of a high-resolution video computer), but undeniably, scientific fraud<sup>12</sup> is like any other fraud, in character and degree - it is no less harmful and just as patently illegal.

There are a few Independent Professionals, who simply won't sell their souls, let alone commit illicit acts, and moreover, who will take no part whatsoever in public-relations-oriented schemes and concoctions, designed to maintain professional esteem and personal images (charisma and programs) at the expense of reliable mechanisms conducive to the formation of neutral, scientifically sound, professional judgments, nor will Independent Professionals perform various promotional choreographic aerial stunts, that are in dynamic and radical cross-tension to science, let alone, the forth-rightness of nature, which to be sure, has no respect for City or Country manners.

Independent Professionals are the kinds of people, who are in extremely short supply - in any field - but who, most acutely, are the kinds of people that our wonderful country needs most. We may not feel the need to praise them, but we should not destroy them either, least of all through the use of legal legerdemain and artificial, phony judicial schemes, as in this case, so commonly found in our courts, and which are founded, even

For a current view of the problem of scientific fraud, see two News & Comment articles by David P. Hamilton in Science, entitled "NIH Finds Fraud in Cell Paper," Vol 251, p. 1552, 29 March 1991, and "Baltimore Throws in the Towel" Vol. 252, p. 768, 10 May 1991.

in these "High Tech" changing times, on those old fashioned, collaborative caucasian, past panaceas and the advantageous productions of jealousy, ignorance and race hate.

Judge Curtin's tactics and this Petitioner's battling with him goes back a half dozen years. In an earlier trip up the mountain top-a-Justice, in Hodge vs. Kelly et al., 86 Civ. 160 C (W.D.N.Y. July 8, 1988) (Curtin, J.), aff'd 868 F. 2d 1267 (2d Cir. 1988) cert. den. 490 U.S. 1081, 104 L. Ed 2d 663 (1989), Judge Curtin had opined, "I do not find that Plaintiff will be irreparably harmed by the proposed work assignment. If he chooses, he may seek employment elsewhere and still attend law school." That form of preliminary injunctive Judge Curtin Justice, was meted out to this Petitioner seeking relief from the open jealousy, maliciousness and race hate ingrained in Attica Prison officials, under the direct control of New York's "Northern Liberal" governor, for their having converted a set of three fungible, routine weekly medical clinics, scheduled and held Monday through Friday from 9:00-11:00 AM, 1:00-3:00 PM and 7:00-9:00 PM, into an instantly concocted, never-before-neversince seen, 10:00 AM - 4:00 PM, clinic monstrosity, having no rational or any other kind of relationship whatsoever, to a legitimate health care objective, but which was merely devised to maliciously preclude law school attendance by this Petitioner, in the middle of the semester, on that vulnerable Valentine's Day, February 14, 1986, in violation of a work contract forbidding the imposition of such schedules, without at least 30 days notice or as a way to discipline an employee. Hodge vs. Kelly et al., is in the certiorari grave vard, but its memory lingers on, mostly because the pervasively unlawful conduct it sought to annihilate, has yet not - even in this "High Tech" age - come to roost on a terrain of old fashioned Justice.

Not unexpectedly - since momentum is the product of the mass and the velocity - Judge Curtin continues in his massive old gestalt of corruption and makes not only fraudulent, sua sponte "medical opinions" in the instant case, but spurious legal procedural distinctions between "admissions" as well, to help out the white law firms and their clients. In his form of Justice and

"Managing Courts in Changing Times," Judge Curtin - using a specially formulated Newtonian calculus, that would befuddle Leibnitz as well - proposes that there exists a differential equational dynamic tension between the substantive truth of a Federal Rules of Civil Procedure, Rule 12 (b)(6), "offered by the Respondents admission truth" and a Federal Rules of Civil Procedure, Rule 36 "requested by the Petitioner admission truth." In other words, if those spontaneous Rule 12 (b)(6) offered admissions were copied verbatim onto another sheet of paper and were instead labeled (under the same caption, of course) as requested Rule 36 admissions, and sent to the Respondents for confirmation, then according to Judge Curtin, those verbatim copied admissions - dy/dx (spoken in the language of the calculus as the derivative of 12 (b)(6) with respect to 36, which a child would know was unity) - would some how be different.13 And so it came to pass, that for that reason Petitioner was, in the district court's pursuance of the virtues of Rule 11, as a noble, fruitful and absolutely efficient way of-"Managing Courts in Changing Times," fined \$ 2000. Perhaps the Federal Judicial Center can help retrain Judge Curtin before he

Petitioner, Daniel Hodge's assertion that F.R.C.P. 12 (b)(6) and 36 were substantially, in fact, operatively identical, enkindled a fulminant judicial wrath. Said Judge Curtin:

This is a gross misstatement of the law. Plaintiff never served a request for admission of facts pursuant to Fed.R.Civ.P. 36, nor were any facts ever stipulated to by defendants. There is no other apparent basis for plaintiff's motion for summary judgment. Given plaintiff's grossly improper reliance upon Fed.R.Civ.P. 36 as a basis for his motion for summary judgment and the absence of any other legitimate basis for that motion, defendants are entitled to sanctions for the costs incurred in responding to the motion. *Eastway Construction Corp. vs. City of New York*, 762 F.2d 243, 252-54 (2d Cir. 1985). (AP 15-16)

Wouldn't Rule 36 requests and stipulations be redundant in light of a Rule 12 (b)(6) offer to summarily admit? Even in these modern "High Tech" changing times, beaming through what seem to be Alzheimeric components of Judge Curtin's statement, there still lurks that old fashioned mens rea perceived to be consonant with corruption and criminality. A Black Plaintiff must, in these modern times, surmount the judicial findings of High Tech Intentionometers and Motivationometers to prevail, whereas only conventional Low Tech, unmetered judicial caprice & corruption need be utilized for the summary dismissal of valid legal claims. Scientific & forensic excellence!

is impeached, after all, "Education<sup>14</sup> is a key to correcting what lingering signs of bias remain in our courts, but the need for education of judges and court staff goes much further." Yes, of course, pursuant to Article I, section 3, clause 6, of the Constitution of the United States of America, the education of judges, according to Article I, section 2, clause 5, (AP 18) pertaining to scientific fraud, corruption and criminality, commences In the United States House of Representatives, and is had in a very special Article I, section 3, clauses 6 and 7, (AP 18) proceeding: In the United States Senate.

Leaving the judgment open for almost three (3) years, merely to determine ridiculous and unjustifiable "punitive attorney's fees" against Petitioner, Daniel Hodge is hardly the kind of standard of performance and, "results that courts should achieve in such basic areas as access to justice, expedition and timeliness, independence, and accountability." It is not at all consistent with, "commitment, . . . terribly hard work, and competence," but is consonant with that same old vestigial corruption, of ages past and present. It must be stopped, irrespective of discretionary certiorari. Protecting a constitutional right is not a discretionary matter, for why would we even need a Constitution, proclaiming Justice for all, if we only selectively enforce the law for a few, and let others completely escape culpability for constitutional violations?

And moreover, the circuit court's sanctioning of Judge Curtin's egregious judicial conduct as allegedly being valid and "interlocutory" while pretending during oral argument (AP 26-34)

Engaging in conduct prejudicial to the effective and expeditious administration of the business of the court is a violation of 28 U.S.C. 372

(c)(1). The district and 2nd circuit court have a problem.

Taken from an address by Associate Justice Sandra Day O'Connor at the Second National Conference on Court Management, Phoenix, Arizona, September 9, 1990 and reprinted in the New York State Bar Journal in February 1991. It was sent by this Petitioner to the members of the United States Senate attached to a letter by Petitioner to Associate Justice O'Connor. This Petition is being sent to all of Congress, the President, the media, the Whole Wide World, including Mr. Gorbachev and Mr. Yeltsin. Justice shall at some point be had, thanks to Rodney King!

to be genuinely seeking justice, yet in their opinion have sedulously evaded jurisdictionally proper issues presented to it for resolution, may indeed be a "Fast Track" to white-is-right Star Trek, but is hardly consistent with old fashioned, terrestrial Solomonian Justice. "Managing Courts in Changing Times," is difficult indeed in these "High Tech Times" because that old rubberstamp is being perennially perfected, even as we perceive that, "the art and science of management are essential ingredients in ensuring the administration of Justice," since there persists that most expected and predictable, monotonous proclamation that (AP 1) on consideration whereof, and no matter how egregious the racist conduct or insupportable the legal foundation, that, "it is now ordered that the judgment of December 21, 1990, and the interlocutory orders of February 4, 1988, and February 17, 1988, on which the final judgment was based in part, are all affirmed for substantially the reasons set forth in Judge Curtin's opinions and orders." Yes, of course, substantially insupportable under any medical or legal rationale and therefore are totally unlawful.

Moreover, while darting and twisting through a spiral trajectory, various power dives, steep rolls and evasive choreography in their last tactical resort, the circuit court judges George C. Pratt, Roger J. Miner, Frank X. Altimari, further proffer that, "Plaintiff's state claims were not specifically developed in the district court, are not part of this action, and therefore are not before us." How many other documents must be presented to a federal court to "specifically develop," and to prove that Petitioner, at this very nanosecond, in these "High Tech" times, still has hospital board-granted full privileges (A 134-135) to practice at Lake Shore Hospital and was removed from the Emergency Room physician's roster (A 161) and that a white physician having his privileges restricted, is still working at Lake Shore Hospital, whereas Petitioner has been unlawfully denied under the guise of multiple pretexts and scientific fraud, and without bylaw protective Procedural and Substantive Due Process - the right to similarly contract his professional services, in blatant violation of 42 U.S.C. 1981?

This is not post-contract discrimination; the contract and practice privileges are still signed, sealed and valid according to the hospital board; it merely lacks enforcement by a federal court, properly invoked to effect enforcement! How is the action still not before the circuit court, even after three years of district court chicanery and unlawful interment? And this is the most gruesome of all - neither was it remanded to be "specifically developed" perhaps before an all white, blond & blue eyed jury even, but was summarily dismissed under that pristine principle of white-is-right, collusive corruption. "Managing Corrupt Courts in Changing Times," is difficult indeed in this age of the "High Technology of Black Oppression."

POINT IV: Policing Of Circuit Courts Should Be Done By A National Court, Which Can Issue Final Binding Decisions, And Which Could Prevent This Assortment Of Interminable Injustice, Even If Certiorari Review, Having The Usual Precedential Value, Were Not Warranted.

It is fatuous to have to come to our nation's highest Court to seek redress from this assortment of garden variety judicial mediocrity, chicanery, corruption and criminality, so blatantly evident in the instant case, because frankly, this Court has more important tasks to perform than to be policing documentarily obvious, valid legal claims and outcomes, described even then as purportedly being, "so far a departure from the accepted and usual course of judicial proceedings as to call for an exercise of this Court's supervision." The truth more likely is that the instant case is only further confirmation of what Black citizens have, as a practical matter, come to know as being, "the accepted and usual course of judicial proceedings," in our system of Just-Us (whites). The white race promotes itself as being the most intelligent and superior of all-a-gods creations, yet cannot add or subtract or perform the most rudimentary of functions when it involves granting Justice to Black people, who because of degradation, intimidation, and resignation are now being kept in modern mental bondage, even without the chains of corporal confinement of ages past.

And Lord knows, white folk don't never intenda do nothin' to Nigga's; Black adversity in employment, educational,

social and political matters, is a mere phenomenon-a-nature, which just spontaneously occurs in a scientific democracy. The real issue, however, is hardly a "High Tech" marvelous behavioral innovation of capricious evolution. It is age old Institutionalized White Racism, of the Dred Scott/Rodney King assortment. It is our National Disgrace! It must be stopped! Our state and federal courts must uphold and enforce the Constitution and laws of the United States of America (Article VI, cl. 3)(AP 18) and desist playing childish games. Enforcement is a policing function having nothing to do with certiorari for interpretation of laws, Marbury vs. Madison, 1 Cranch 137 (1803), in obvious documentary cases as this is. Moreover, policing optimally should be done by a National Court, which can issue final binding decisions subject to review only by the Supreme Court of the United States - as was recommended by the June 20, 1975 report of the Commission on Revision of the Federal Court Appellate System. The National Court, (Article III, section 1)(AP 18) located jurisdictionally, intermediarily between the circuits and Supreme Court, should have a non-partisan or commission system of judicial selection, with judges (including physician/attorneys, engineer/attorneys, accountant/attorneys, musician/attorneys etc.,) appointed for a term of years, making it a blended jewel, being simultaneously less susceptible to life-tenured corruption although admittedly more susceptible to instability - but exceedingly appropriate for handling all those cases requiring judicial supervision - as opposed to certiorari - because such cases lack precedential value, leaving the certiorari workload of our Supreme Court considerably more manageable.

## CONCLUSION

For all the foregoing reasons, a writ of certiorari should be issued for this Court to exercise its power of supervision; so, that Petitioner can finally realize the benefits of his already granted and constitutionally protected hospital privileges,

Dated: Buffalo, N.Y. August 10, 1991

Daniel R. Hodge, M.D. J.D.

### AP 1

#### UNITED STATES COURT OF APPEALS FOR THE SECOND CIRCUIT

At a stated Term of the United States Court of Appeals for the Second Circuit, held at the United States Courthouse in the City of New York, on the 15th day of May, one thousand nine hundred and ninety one.

Present:

George C. Pratt, Roger J. Miner, Frank X. Altimari, WDNY 87-cv-566 Curtin

# Circuit Judges.

DANIEL R. HODGE,

Plaintiff-Appellant,

- against -

LAKE SHORE HOSPITAL, INC., STAT SERVICES, INC., JOSEPH G. CARDAMONE, M.D., LYNN FELDMAN, D.O., JAMES B. FOSTER, C.E.O.,

Defendants-Appellees.

This appeal from a final judgment of the United States District Court for the Western District of New York, John T. Curtin, <u>Judge</u>, came on to be heard on the transcript of record and was argued by counsel.

ON CONSIDERATION WHEREOF, it is now ordered that the judgment of December 21, 1990, and the interlocutory orders of February 4, 1988, and February 17, 1988, on which the final judgment was based in part, are all affirmed for substantially the

reasons set forth in Judge Curtin's opinions and orders dated February 4, 1988, February 17, 1988, and December 19, 1990, respectively. Plaintiff's state claims were not specifically developed in the district court, are not part of this action, and therefore are not before us. Appellees' requests for appellate sanctions are denied.

N.B. This summary order will not be published in the Federal Reporter and should not be cited or otherwise relied upon in unrelated cases before this or any other court.

George C. Pratt, U.S.C.J. Roger J. Miner, U.S.C.J. Frank X. Altimari, U.S.C.J.

Entered: May 15, 1991

# UNITED STATES DISTRICT COURT WESTERN DISTRICT OF NEW YORK

DANIEL R. HODGE, JUDGMENT IN A CIVIL CASE -vs-LAKE SHORE HOSPITAL, INC., STAT SERVICES, INC., JOSEPH G. CARDAMONE, M.D., CIV-87-566C LYNN FELDMAN, D.O., JAMES B. FOSTER, C.E.O.

[ ] JURY VERDICT. This action came before the Court for a trial by jury. The issues have been tried and the jury has rendered its verdict.

[X] DECISION BY COURT. This action came to hearing before the Court. The issues have been heard and a decision has been rendered.

IT IS ORDERED AND ADJUDGED that santions are awarded against the plaintiff in the sum of \$ 2,000.00. The sums of \$ 500.00 shall be paid to Cheryl Fisher, Esq., \$ 500.00 to Kathleen Frensky Tranelli, Esq., \$ 500.00 to John Gadzuk, Esq., and \$ 500.00 to Sharon M. Porcellio, Esq. Complaint is dismissed.

December 21, 1990 Clerk, MICHAEL J. KAPLAN

Deputy Clerk, Irene J. Imasulo

# UNITED STATES DISTRICT COURT WESTERN DISTRICT OF NEW YORK

DANIEL R. HODGE,

Plaintiff,

-VS-

CIV-87-566C

LAKE SHORE HOSPITAL, INC., et al.,

Defendants.

On February 4, 1988, the court issued an order granting the motion of all defendants to dismiss, denying plaintiff's motion for summary judgment, and awarding all defendants costs and attorneys' fees pursuant to Rule 11 sanctions were awarded because of the activities described by the court in its order (Item 20).

A scheduling order was issued on February 17, 1988. In it, the court noted that it would withhold entry of judgment until after the questions of attorney's fees was decided. Nevertheless, a notice of appeal was filed by plaintiff on February 19, 1988 (Item 22).

Cheryl Fisher, Esq., attorney for defendants Stat Services and Lynn Feldman, filed an affidavit on February 25, 1988 (Item 24), requesting \$505.00 for attorneys' fees and suggested to the court that Rule 11 sanctions should be applied not only against the plaintiff but also against his attorney.

Kathleen Frensky Tranelli, Esq., attorney for defendant Cardamone, filed an affidavit seeking \$520.00 in attorneys' fees and sanctions in the total amount of \$794.66, and suggesting that the sanctions should be equally divided between plaintiff and his attorney.

John S. Godzuk, Esq., in behalf of defendant Lake Shore Hospital and James B. Foster, filed an affidavit (Item 26) seeking attorneys' fees in the sum of \$890.00. Mr. Godzuk was acting as personal counsel for defendant in the action.

Sharon M. Porcellio, Esq., also acting in behalf of the Hospital and Foster, seeks attorneys' fees in the among of \$1,337.00, making a total sum of attorneys' fees in the amount of \$2,227.00 sought by the Hospital and Foster (Item 27).

Plaintiff Daniel R. Hodge, M.D., proceeding pro se, filed an affidavit in opposition (Item 28). The tone of the affidavit is revealed by its title, which is as follows: "Plaintiff's Affidavit in Support of Immediate Judgment, Further Severe Penalties and Fines Against the Plaintiff and for even more Magnanimous Fees for the White Racist Defendants and their Counsels and that the Court then recuse itself due to its Conflict of Interest as Self-Appointed Medical Expert Witness for the Defendants."

The application of plaintiff for recusal is denied.

On April 29, 1988, the Court of Appeals for the Second Circuit issued a Mandate (Item 29) directing that the appeal be dismissed with sanctions, including double attorneys' fees and costs; and, more particularly, ordered as follows: "The appeal is dismissed. However, appellee is allowed only ordinary costs on this appeal, without prejudice to the application in the district court for costs and attorneys' fees pursuant to Fed.R.Civ.P. 11."

Following this, defendants Stat Services and Lynn Feldman, through their attorney, Cheryl Fisher, Esq., filed and affidavit seeking an award of attorneys' fees incurred in obtaining the dismissal of plaintiff's appeal. In her affidavit, Ms. Fisher relates that before the plaintiff filed his notice of appeal, he was notified by the Clerk that the court's order was non-final and that appeal was premature. An affidavit submitted by Ms. Fisher requests an award of attorneys' fees for defending against plaintiff's appeal in the sum of \$1,100. She has attached the

memorandum which she filed with the Second Circuit on May 18, 1988.

Plaintiff filed an affidavit in opposition to defense counsel's application. He entitles his affidavit "Plaintiff's Affidavit of Justice" (Item 32).

In assessing an appropriate sanction, I find that it is clear that the main force in deciding how this case should be processed was that of the plaintiff himself. Therefore, any sanction imposed should fall principally upon his shoulders. On the other hand, substantial money sanctions will not be of much benefit to defendants and may place a severe hardship on the plaintiff.

The attorney was not active in pursuing the appeal, and although his letter of February 19, 1988 (Item 23) may arguably be incorrect, I do not feel under the circumstances that there is sufficient cause to sanction him personally. The application to sanction the attorney is denied.

Sanctions are awarded against the plaintiff in the sum of \$2,000.00. The sum of \$500.00 shall be paid to Cheryl Fisher, Esq., \$500.00 to Kathleen Frensky Tranelli, Esq., \$500.00 to John S. Godzuk, Esq., and \$500.00 to Sharon M. Porcellio, Esq. It is the intention of the court that this amount shall represent sanctions for all actions of the plaintiff in the District Court and in the Appellate Court. The Clerk shall enter judgment accordingly, and shall also enter judgment dismissing the complaint.

So ordered.

JOHN T. CURTIN United States District Judge

Dated: December 19, 1990

## UNITED STATES COURT OF APPEALS FOR THE SECOND CIRCUIT

HODGE v. LAKE SHORE HOSP.

88-7157 NOTICE OF MOTION Dismissal of Appeal with Sanctions

## MOTION BY:

#### OPPOSING COUNSEL:

Cheryl Smith Fisher, Esq. Magavern & Magavern 20 Cathedral Park Buffalo, NY 14202 (716) 856-3500

Daniel R. Hodge, pro se 1528 Statler Towers Buffalo, NY 14202 (716) 691-3300

Terrence D. McKelvey, Esq. 1301 Statler Towers Buffalo, NY 14202 (716) 852-0586

Has consent of opposing counsel:

A. been sought?[]Yes []No B. been obtained?[]Yes []No Has service been APPEAL effected?[x]Yes []No

Is oral argument desired:

[]Yes [x]No

{Substantive motions only}

Requested return date: April 15, 1988

{See Second Circuit 27(b))

Has argument date of appeal Will parties agree to maintain been set:

A. by scheduling order?[]Yes is heard? []Yes []No [x]No

EMERGENCY MOTIONS. MOTIONS FOR STAYS & INJUNCTION PENDING

Has request for relief been made below? []Yes []No {See F.R.A.P. Rule 8}

Would expedited appeal eliminate need for this motion?

Rule []Yes []No

If No, explain why not.

the status quo until the motion

B. by firm date of argument notice?[]Yes [x]No

Judge or agency whose order is being appealed: John T. Curtin, U.S. District Court, Western District of New York

Brief statement of the relief requested:

Dismissal of appeal, with sanctions, including double attorneys'

fees and costs

By: {signature of attorney}

Cheryl Smith Fisher

Appearing for: (Name of Party)

Date: March 16, 1988

Stat Services, Inc. Lynn Feldman, D.O. Defendant

ORDER\_\_\_\_

IT IS HEREBY ORDERED that the motion be and it hereby disposed of as follows: The appeal is dismissed. However, appellee is allowed only ordinary costs on this appeal, without prejudice to the application in the district court for costs and attorneys fees, pursuant to Fed. R. Civ. P. 11

WILFRED FEINBERG, Chief Judge THOMAS J. MESKILL, LAWRENCE W. PIERCE Circuit Judges

Entered:

April 20, 1988

# UNITED STATES DISTRICT COURT WESTERN DISTRICT OF NEW YORK

DANIEL R. HODGE, M.D.

Plaintiff,

-VS-

CIV-87-566C

LAKE SHORE HOSPITAL, INC.
STAT SERVICES,INC.
JOSEPH G. CARDAMONE, M.D.
LYNN FELDMAN, D.O., and
JAMES B. FOSTER, C.E.O.,
Defendants.

APPEARANCES:

TERRENCE D. McKELVEY, ESQ., Buffalo, New York, for Plaintiff.

MAGAVERN & MAGAVERN (CHERYL SMITH FISHER, ESQ., of Counsel), Buffalo, New York,

NIXON, HARGRAVE, DEVANS & DOYLE (KATHLEEN TRANELLI, ESQ., of Counsel).

Rochester, New York, 14663

-and-

DAMON & MOREY (SHARON M. PORCELLIO, ESQ., of Counsel), Buffalo, New York, for Defendants.

Plaintiff in this action is a black physician. He alleges that defendants, acting from racially discriminatory motives, defamed him and dropped him from the Emergency Room physicians' roster at defendant Lake Shore Hospital, Inc. [Lake Shore]. Plaintiff alleges that defendants' actions also prevented him from contracting with other hospitals and physician's referral agencies. Plaintiff contends that defendants' action constitute interference with contract, conspiracy to interfere with contract, and neglect to prevent interference with contract under 42 U.S.C.

sections 1981, 1985, and 1986. Plaintiff seeks, inter alia, \$10,000,000.00 punitive damages and \$10,000,000.00 damages for emotional distress. Plaintiff also claims that he is entitled to an award of attorneys' fees under 42 U.S.C. 1988.

All defendants move, pursuant to Fed.R.Civ.P. 12(b)(6), to dismiss plaintiff's complaint. Plaintiff cross-moves for summary judgment. Defendants Lake Shore, Stat Services, Inc., [Stat Services], Lynn Feldman, and James B. Foster move, pursuant to Fed.R.Civ.P. 11, for attorneys' fees and costs incurred in responding to plaintiff's cross motion for summary judgment. The court heard **oral argument.**<sup>1</sup>

#### **Facts**

For purposes of determining defendants' motions to dismiss, the court assumes plaintiff's factual allegations to be true. The following is a brief summary of the facts according to plaintiff, as alleged in his complaint and affidavit and the exhibits thereto.

Plaintiff states that his services were provided to defendant Lake Shore through defendant Stat Services. Item 1, 12. The latter contracts with Lake Shore to provide the hospital with 24-hour Emergency Room [ER] physician coverage. Plaintiff was granted temporary work privileges, making him eligible to work on the Lake Shore ER staff, in 1986, and he was reappointed for 1987-88. Item 1, Exhs. 1-4.

Plaintiff states that during 1986 and early 1987, he was

At the request of plaintiff's counsel, oral argument on these motions was adjourned by order from December 18, 1987, to January 22, 1988, after several prior adjournments. In the order, the court directed that if plaintiff or his attorney was not ready to proceed on January 22, the court would consider the motion submitted. On January 22, 1988, neither attorney for plaintiff nor plaintiff appeared. All three defense counsels were present and ready to proceed. The court asked the Clerk to make a telephone inquiry at Mr. McKelvey's office. It was then learned that he was in Rochester and unable to be in attendance. With that, the court considered these motions submitted.

involved in a number of disputes with defendants regarding his treatment decisions and his relations with patients. Item 1, para. 4-6; Item 2, para. 8-64. Plaintiff's treatment of a patient's nearly severed toe was the subject of an ER Committee meeting in March, 1987. Plaintiff was invited to this meeting, but did not attend. Item 1, Exhs. 6, 7. The Committee reviewed and later provided plaintiff with a letter critical of plaintiff's treatment decision in this instance from defendant Dr. Cardamone, a private physician in Dunkirk, New York, who has staff privileges at Lake Shore and was voluntary chairman of Lake Shore's ER Committee in 1986.

Plaintiff states that after the March, 1987 meeting of the ER Committee, he was no longer scheduled for his "regular Saturday time slot" in the Lake Shore ER. Item 1, Exh. 12. He alleges that defendant Foster, administrator of Lake Shore; defendant Feldman, president of Stat Services; and defendant Dr. Cardamone acted in concert, from racially discriminatory motives, to drop plaintiff's name from the ER physician's roster. Item 1, para. 7. Plaintiff alleges that the Board of Directors of Lake Shore "neglected to prevent this conspiracy". Item 1, para. 11.

### Discussion

## 1. Plaintiff's Section 1981 Claim

Section 1981 of Title 42 provides as follows:

All persons within the jurisdiction of the United States shall have the same right in every State and Territory to make and enforce contracts, to sue, be parties, give evidence, and to the full and equal benefit of all laws and proceedings for the security of persons and property as is enjoyed by white citizens, and shall be subject to like punishment, pains, penalties, taxes, licenses, and exactions of every kind, and to no other.

Section 1981 can be violated only by intentional,

purposeful discrimination. General Building Contractors Ass'n., Inc. v. Pennsylvania, 458 U.S. 375, 391 (1982); Guardians Ass'n. of NY City Police Department, Inc. v. Civil Service Commissions, 633 F.2d 232, 268 (2d Cir. 1980), aff'd on other grounds, 463 U.S. 582 (1983). Plaintiff must allege disparate treatment of similarly situated white doctors. Long v. Ford Motor Co., 496 F.2d 500 (6th Cir. 1974).

Plaintiff alleges that defendants dropped him from the ER Physicians' roster in March, 1987, thereby depriving him of the right to make and enforce a contract to the same extent enjoyed by white doctors. However, plaintiff's own affidavit provides overwhelming evidence that plaintiff's dispute with defendants had its origin in differences about medical treatment, not in differences of race.

Plaintiff's affidavit describes, for more than 20 pages, the history of his disputes with defendants about his medical treatment decisions in the ER and his method of dealing with patients. Plaintiff states his general view that:

Patients can and do use their bona fide chronic disease(s) with varying degrees of leverage, pivotally in socially conflictual life situations for some secondary gain, far more frequently than is commonly recognized or believed by physicians generally and Emergency Room physicians more specifically.

Item 2, para. 15. Plaintiff's memorandum of law also advises that the "plaintiff is also of the opinion that hospitalization is for truly sick people, not a dumping ground for troublesome elderly or a haven for malingerers". Item 13, p.3.

Plaintiff then describes his "frank and honest" conduct in treating patients on several occasions which became the source of disputes with defendants. He notes, for example, that he advised an asthmatic woman breathing at twice the normal respiration rate that she was primarily hysterical, and only secondarily asthmatic. Item 2, paras. 8, 28. Plaintiff defends his

actions as follows:

"Pretending along with the patient or even worse not recognizing the nature of the problem, and treating a malingerer as if his or her problem were valid and credibly related to their chronic disease, for fear that the patient or parent may unpredictably or even predictably would react in a negative fashion, is despite the popular notions to the contrary, not appropriate management of the hysteric. When the emperor has no clothing, he has no clothing."

Plaintiff states that he also advised the patient's mother that although she "may not like to know what is really happening here," her daughter was "breathing, purposely, a lot more than she has to [and] trying very hard to make us believe" that she was having an asthma attack. Item 2, para. 38.

Plaintiff states that defendant Dr. Feldman criticized plaintiff for his treatment of this patient, noting that the patient's arterial blood gas result was abnormal and indicative of asthma. Plaintiff again asserted that the blood gas reading was the result of the patient's "deliberately overbreath[ing] for one hour." Item 2, para. 33.

Plaintiff's affidavit describes several other similar disputes with defendants about plaintiff's treatment of patients in the ER during 1986. As described by plaintiff himself, all of these disputes clearly originate from serious differences about proper medical treatment. Plaintiff defends, in great detail, his medical knowledge and judgment in each instance, and attacks that of defendants. However, he makes only the most conclusory allegations of racial discrimination, and provides no facts alleging disparate treatment or discriminatory motive. Bare conclusory allegations of racial discrimination do not state a claim under section 1981; "[r]acial motive 'in the air, so to speak will not do." Armstead v. Town of Harrison, 579 F. Sup p. 777, 780 (S.D.N.Y. 1984), quoting Palsgraf v. Long Island RR, 248 N.Y.339 341 (1928). In sum. plaintiff's own affidavit clearly

establishes the non-racial reasons for his dismissal, and plaintiff's complaint fails to allege any facts which would indicate disparate treatment by defendants of white doctors in similar circumstances. Plaintiff therefore has not stated a cause of action under section 1981 against any defendant, and his claims under section 1981 are dismissed.

### 2. Plaintiff's Section 1985 and 1986 Claims

Plaintiff claims that defendants conspired to deprive him of his civil rights as proscribed by section 1985(3) of Title 42. Section 1985(3) prohibits conspiracies to deprive persons of the equal protection of the laws, or equal privileges and immunities under the laws. The rights, privileges, and immunities that section 1985(3) vindicates must be found elsewhere. United Brotherhood of Carpenters and Joiners v. Scott, 463 U.S. 825. 833 (1983), and here the right claimed to have been infringed has its source in the due process clause of the fourteenth amendment. Item 1, para. 9. Because that amendment restrains only official conduct, to make out his section 1985(3) claim, it was necessary for plaintiff to prove that the State was somehow involved in or affected by the conspiracy. Id. However, plaintiff makes no allegations of state action in his complaint, and has therefore also failed to state a claim against any defendant under section 1985(3).

Section 1986 imposes liability for failing to prevent the wrong perpetrated in a section 1985(3) conspiracy. Because plaintiff's section 1985 claim fails against all defendants, his section 1986 claim is dismissed as well.

# 3. Rule 11 Motion for Attorneys' Fees and Costs

Defendants Lake Shore, Stat Services, Lynn Feldman, and James B. Foster move for attorneys' fees and costs incurred in responding to plaintiff's cross motion for summary judgment. Item 14, 15.

In their motions to dismiss, defendants accurately note that for purposes of their motions, they must presume all factual allegations by plaintiff to be true. In response to defendants' motions, plaintiff served a memorandum of laws signed by his attorney in support of his cross motion for summary judgment. In this memorandum, counsel for plaintiff contends that defendants have, by presuming all of plaintiff's factual allegations to be true, admitted such facts pursuant to Fed.R.Civ.P. 36, and that upon those facts plaintiff is entitled to summary judgment. Counsel for plaintiff contends as follows:

"In their memorandum, counsel for the defendants . . .make a preliminary statement, in which they attempt to leave the door open to later refute the factual allegations of the plaintiff's complaint and affidavit, by quoting J.W. Moore and J. D. Lucas, 2A Moore's Federal Practice, 12.07 (2-5). That smoke screen unfortunately will not later be converted into a useful defense, because once defendants admit that the factual allegations are true, the matter is settled. F.R.C.P. 36(b). If there are factual allegations and/or legal conclusions and opinions couched as factual allegations, to which the defendants take exception or which are objectionable on whatever grounds, then defendants should so state in specific terms. F.R.C.P. Rule 36(a). Presently all factual allegations must not only be given a presumption of truthfulness, but are legally valid admissions. If operative facts are inappropriately applied when plaintiff makes what can actually be termed legal conclusions, then the court, whose function is to apply the operative fact to the law, will make appropriate corrections. But, the liability and culpability of the defendants for admissions, regardless is a settled matter and is conclusively established." Item 13, pp.7-8.

This is a gross misstatement of the law. Plaintiff never served a request for admission of facts pursuant to Fed.R.Civ.P. 36, nor were any facts ever stipulated to by defendants. There is no other apparent basis for plaintiff's motion for summary judgment.

Given plaintiff's grossly improper reliance upon Fed.R.Civ.P. 36 as a basis for his motion for summary judgment

and the absence of any other legitimate basis for that motion, defendants are entitled to sanctions for the costs incurred in responding to the motion. Eastway Construction Corp. v. City of New York, 762 F.2d 243, 252-54 (2d Cir. 1985). Though defendant Dr. Cardamone has not moved for such costs, he, as well as all other defendants, have responded to plaintiff's motion by affidavit otherwise (Items 14, 15, 17). Accordingly, I find that all defendants in this action are entitled to sanctions under Rule 11. Defendants are directed to submit, by March 15, 1988, affidavits setting forth their respective costs and attorney's fees incurred in responding to plaintiff's motion for summary judgment. Plaintiff shall thereafter submit by May 3, 1988, any objections to the amounts specified in defendants' affidavits. Both plaintiff and defendants are directed to discuss whether Rule 11 sanctions should be applied to plaintiff only, to plaintiff's attorney only, or to both.

To summarize, the motions of all defendants to dismiss plaintiff's complaint are granted. Plaintiff's cross motion for summary judgment is denied, and all defendants are awarded, pursuant to Rule 11, costs and reasonable attorney's fees incurred in responding to that motion. The court shall later determine the amount of costs and fees to be awarded, and whether they shall be imposed upon plaintiff, plaintiff's attorney, or both.

So ordered.

JOHN T. CURTIN United States District Judge

Dated: February 4, 1988

# UNITED STATES DISTRICT COURT WESTERN DISTRICT OF NEW YORK

DANIEL R. HODGE, M.D.,

Plaintiff,

-VS-

CIV-87-566C

LAKE SHORE HOSPITAL, INC., et al.,

Defendants.

The defendants shall file detailed affidavits in support of their application for attorney's fees not later than February 29, 1988. Plaintiff may respond by March 21, 1988. The court will then consider the application submitted.

The court will withhold entry of judgment until after the question of attorney's fees is decided. If any party believes that judgment shall be entered earlier, the court shall be notified with the reasons for such entry.

So ordered.

JOHN T. CURTIN United States District Judge

Dated:

February 17, 1988

# CONSTITUTIONAL PROVISIONS, STATUTES AND REGULATIONS

U.S. Constitution, Art. I, sect 2, cl. 5

The House of Representatives shall choose their Speaker and other officers, and shall have the sole power of impeachment.

U.S. Constitution, Art. I, sect 3, cl. 6

The Senate shall have the sole power to try impeachments. When sitting for that purpose, they shall be on oath or affirmation.

U.S. Constitution, Art. I, sect 3, cl. 7

Judgment in cases of impeachment shall not extend further than to removal from office, and disqualification to hold and enjoy any office of honor, trust, or profit under the Unites States; but the party convicted shall nevertheless be liable and subject to indictment, trial, judgment, and punishment, according to law.

U.S. Constitution, Art. III, sect 1

The Judicial Power of the United States shall be vested in on Supreme Court, and in such inferior courts as the Congress may from time to time establish. The Judges, both of the Supreme and inferior courts, shall hold their offices during good behavior, and shall at stated times receive for their services a compensation which shall not be diminished during continuance in office.

U.S. Constitution, Art. VI cl. 3

The Senators and Representatives before mentioned, and the Members of the several State Legislatures, and all executive and judicial Officers, both of the United States and of the several States, shall be bound by Oath or Affirmation, to support this Constitution; but no religious Test shall ever be required as a Qualification to any Office or public Trust under the United States.

U.S. Constitution, Amendment I

Congress shall make no law respecting an establishment of religion, or prohibiting the free exercise thereof; or abridging the freedom of speech, or of the press; or the right of the people peaceably to assemble, and to petition the Government for a redress of grievances.

U.S.Constitution, Amendment V

...nor be deprived of life, liberty, or property, without due process of law;

U.S. Constitution, Amendment XIV

Section 1. ... No state shall make or enforce any law which shall abridge the privileges or immunities of citizens of the United States, nor shall any state deprive any person of life, liberty or property without due process of law, nor deny to any person within its jurisdiction the equal protection of the laws.

42 U.S.C. 1981

Equal rights under the law: All persons within the jurisdiction of the United States shall have the same right in every State and Territory to make and enforce contracts, to sue, be parties, give evidence, and to the full and equal benefit of all laws and proceedings for the security of persons and property as is enjoyed by white citizens, and shall be subject to like punishment, pains, penalties, taxes, licenses, and exactions of every kind, and to no other.

42 U.S.C. 1982

Property rights of citizens: All citizens of the United States shall have the same right, in every State and Territory, as is enjoyed by white citizens thereof to inherit, purchase, lease, sell, hold, and convey real and personal property.

42 U.S.C. 1983

Civil action for deprivation of rights: "Every person who, under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory, subjects, or causes to be subjected, any citizen of the United States or o ther person within the jurisdiction thereof to the deprivation of any rights, privileges, or immunities secured by the Constitution and laws, shall be liable to the party injured in an action at law, suit in equity, or other proper proceeding for red ress."

## 42 U.S.C. 1985

Depriving persons of rights and privileges: in any case of conspiracy set forth in this section, if one or more persons engaged therein do, or cause to be done, any act in furtherance of the object of such conspiracy, whereby another is injured in his person or property, or deprived of having and exercising any right or privilege of a citizen of the United States, the party so injured or deprived may have an action for the recovery of damages, occasioned by such injury or deprivation, against any one or more of the conspirators.

## 42 U.S.C. 1986

Every person who, having knowledge that any of the wrongs conspired to be done, and mentioned in section 1985 of this title, are about to be committed, and having power to prevent or aid in preventing the commission of the same, neglects or refuses so to do, if such wrongful act be committed, shall be liable to the party injured, or his legal representatives, for all damages caused by such wrongful act, which such person by reasonable diligence could have prevented; and such damages may be recovered in an action on the case; and any number of persons guilty of such wrongful neglect or refusal may be joined as defendants in the action.

## 42 U.S.C. 1988

In any action of proceeding to enforce a provision of section 1981, 1982, 1983, 1985 and 1986 of this title...the court, in its discretion, may allow the prevailing party, other than the United States, a reasonable attorney's fee as part of the costs.

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## UNITED STATES COURT OF APPEALS FOR THE SECOND CIRCUIT

DANIEL R. HODGE,

Plaintiff-Petitioner,

-against-

Docket No. 91-7063

LAKE SHORE HOSPITAL INC., et al.,

Defendants-Respondents.

Heard May 9, 1991 Courtroom #1705 United States Courthouse 40 Foley Square New York, New York

BEFORE:

GEORGE C. PRATT,

Presiding

ROGER J. MINER FRANK X. ALTIMARI

Circuit Court Judges

(Transcribed By Tape)

S & S REPORTING CO., INC. 132 Nassau Street New York, New York 10038 (212) 962-2915

# APPEARANCES:

DANIEL R. HODGE, M.D. Petitioner

MARGARET A. CLEMENS, ESQ. Attorney for Respondent Joseph G. Cardamone, M.D.

THOMAS R. SMITH, ESQ. Attorney for Respondent Lake Shore Hosp., Inc. James B. Foster

CHERYL SMITH FISHER, ESQ.
Attorney for Respondent
Stat Services and Doctor Feldman

JUDGE PRATT: Hodge against Lake Shore Hospital.

DOCTOR HODGE: May it please the Court, I am Daniel Hodge, Plaintiff-Appellant. What you have before you here is a documentary summary judgment disposition on every claim.

No jury needs to say that Doctor Hodge was granted full privileges at Lake Shore Hospital to practice in 1987 and 1988, signed by Delmar Brinkman, Lake Shore Hospital Board Chairman, on December 23, 1986, and announced in a letter to Doctor Hodge on January 12, 1987. It is in the appendix on 134 and 135. No jury needs to say that Doctor Hodge was removed from the Lake Shore Hospital physicians roster only one day later on January 13, 1987 at page 161. That is documentary summary judgment, regardless of any proffered reasons for the denial of hospital privileges.

No jury needs to say that Doctor Hodge was removed from Lake Shore Hospital without this ad hoc committee report of corrective action interview, which is mandatorily required pursuant to Article 7, Section 1-B and C of the Lake Shore Hospital bylaws. These red anemic briefs have not one word to talk about those bylaws which were summarily violated. No jury needs to say that Doctor Hodge was removed from the Lake Shore Hospital emergency room physicians roster without a notice and an opportunity to be heard, as is mandatorily required pursuant to Article 8, Section 1 through 7 there, that hearing and appeal review procedure that any person, white or black, deserves to have before they are removed. It's Documentary summary judgment disposition regardless of any proffered reasons for the denial of bylaw mandated due process protections.

No jury needs to say that Doctor Hodge is black, and there is another doctor, Doctor Gilbert is white. They admit this. Doctor Gilbert, who has his privileges compromised - and they have a right to do that - is allowed to practice anyhow. Doctor Hodge is removed from the emergency room roster, although he has full privileges. They voice these so-called legitimate non-discriminatory reasons why they removed this doctor without

all these protections, without even notice. Well, it turns out, he's very argumentative, callous attitude. Well, are these conclusionary allegations and accusations also, which they can use? They can call people anything they want. Just come into the court with something to prove it, so the Court can conclude with you, that you, in fact, are right in terms of your so-called conclusionary allegations.

Improper treatment of patients, they claim, and differing opinions. Well, so what? Differing opinions have to mean something. Asking Judge Curtin to properly determine an arterial blood gas analysis is like asking Mickey Mouse a medical opinion. He has no place discussing those kinds of matters without medical expert help. He can't even explain why he kept a judgment open for three years without entering the same for some ministerial act of allowing attorney's fees of two thousand dollars for a black man, who already was denied fifty-five thousand dollars a year for three years in a row. He can't explain that.

I want the counsels when they come right here before you, who are defending these people, to say what it is that a patient, who has an arterial blood gas determination of a partial pressure of carbon dioxide of 23.4, and a partial pressure of oxygen of 66.7, as is right here in this brief on Page 137, whether or not that is an asthmatic fraud being mistreated by a white doctor, and whether or not that is malpractice, which it is, based on the information I have provided the Court right here on Page 45, in that footnote, from an all white journal from England over there, the Lancet, and it is not even modern medicine. Twenty-five years ago, that stuff was available to doctors who know.

This doctor practiced right here, trained here in Kings County, where we have emergency rooms with an asthmatic room specifically designated for asthma, ten people sometimes lined up on a wall there having to treat. That is the kind of training I have had. I am not going to let anybody - I don't care who they are - to interfere with me making a valid judgment clinically speaking about a patient's condition, and then properly handling it without malpractice. I don't care what the nurse says.

Hodge is very argumentative; he is a hard guy to get along with, because he won't tolerate nonsense. If it was your granddaughter, do you want a Hodge to say no, she does not get treatment, because that is the way it is? That is what this country is about.

It is not about you do something because your buddy said so, or you do something because you got to protect doctor so-and so, who is white, green, pink or whatever. And it makes no difference whether he drives a Cadillac or he drives an Escort. It makes no difference to me what he does. The thing that you do to determine his legal status is the governing law, not some social status. That is essentially what you have before you here, and these people determined, ultimately got together ruining my name with every hospital that they can think of, putting all kinds of stories in there that have no legal merit whatsoever; and it continues.

It even got to the point where the counsel, who have to abide by disciplinary rules, go on to make things in affidavits totally fraudulent - bringing in facts, undisputed facts, sure, just as immaterial as they are undisputed, to the point of actually lying, putting the stuff, work products of counsel, putting the stuff in affidavits, a violation of federal law, going on to try to tamper with the victim in violation of 18 USC 1215. It turns out, there is no way in the world, reviewing this record, even from anyone who has got any expertise whatsoever in medicine, who is not connected to some special interest, who can, as a scientist say, hey, this doctor did what was right.

This doctor did not get involved in all kinds of show-biz medicine. I don't practice show-biz medicine. Medicine is hard enough as it is. It is a science which is an art, too. You have to know when to not do something. You have to know when you can interfere, and do more harm than good, and you have to do this. Your hands have to be untied by all kinds of ridiculous considerations that are totally immaterial to your making a decision about someone's life, someone's health, someone's whole conduct of the rest of their days. That is what is before you. A doctor who stands up and says I won't do it because I can't justify, that doctor gets thrown out, but the doctors who are

white, for whatever reason, are kept there anyway, and this doctor is thrown out. There is summary judgment on every issue in this case.

JUDGE PRATT: Thank you, Doctor Hodge. Ms. Clemens.

MS. CLEMENS: May it please the Court, my name is Margaret Clemens, and I represent one of the Appellees here, Doctor Joseph Cardamone. I will address two of the issues that are pending before the Court today, and my co-counsel will address the remaining two between them. The issues that I will address were not decided by the Court below, and did not form part of the Court's opinion. The first is that Section 1981 has been held by the United States Supreme Court since this case was decided below, as not extending any protection to post contract formation conduct. The conduct --

JUDGE PRATT: You are referring to Patterson, is that it?

MS. CLEMENS: That is Patterson versus McLain, yes, Your Honor. The conduct that is alleged in this case involves an allegedly discriminatory removal from a roster, which is, in essence, a termination of employment, and that is very clearly seen in the record at Page 13 in Paragraph 6 of the Plaintiff's affidavit, and in the record on Page 26, in Paragraph 45. He is talking about a discriminatory dismissal from the hospital. That type of conduct is not covered any longer by Section 1981, and the Supreme Court made that clear in that Patterson decision.

JUDGE PRATT: How about by 1985, because he alleges it is a conspiracy?

MS. CLEMENS: In order to state a claim under Section 1985, you either need state action, which there is none, and the Court below found there was none, or you need a viable Section 1981 claim, which does not have one.

JUDGE PRATT: How about Griffin against Breckenridge,

which says that the 13th Amendment is a sufficient constitutional basis for asserting a claim of private conspiracy under 1985?

MS. CLEMENS: I understand that, but to state a claim under 1985, you have to have a claim under the 13th Amendment, and in this case, we don't believe that the Plaintiff has initially met that burden, and that is what the Court below found, that he --

JUDGE PRATT: Racial discrimination isn't the 13th Amendment? Isn't that at the heart of it?

MS. CLEMENS: Yes, but the Court below found --

JUDGE PRATT: Invidious racially discriminatory animus?

MS. CLEMENS: If that were the case, if there were evidence that the decision below was based on racially discriminatory animus, then that may form the basis, but the Court below --

JUDGE PRATT: Isn't that his whole claim?

MS. CLEMENS: That is his claim, but the Court below found that there was no basis for it, and my co-counsel is going to address that particular issue in more depth. The second issue that I would like to address involves only my client, Doctor Cardamone, because he himself had no personal involvement in the decision that forms the basis of this complaint. Doctor Cardamone is a private physician. He made a complaint that is in the record at Page 144 concerning one incident of treatment of a toe to the emergency room committee, which is basically a quality assurance committee. He did not sit on the committee at the time. He made --

JUDGE PRATT: Was that the asthma patient?

MS. CLEMENS: No, that is the patient that had a

severely injured toe that was nearly severed, and he made a complaint that the treatment that was given was very inadequate, and would they please investigate. As I said, that is in the record at Page 144, but he did not and was not involved in any decision-making in whether or not he was to actually be removed from the emergency room roster.

JUDGE MINER: Can the complaint in this case be read to allege pendant state claims towards contract interference and contract slander, and so forth?

MS. CLEMENS: They are not specifically asserted in the complaint, and if -- so they were not reached by the Court below. For defamation, he would need more than -- he would have to, under New York law, allege a lot more with more specific allegations what the defamatory statements were. If you look at the record at Page 144, that is pure opinion as far as whether or not medical treatment was inadequate. For these reasons, we believe that the Court should be affirmed below.

JUDGE PRATT: Thank you, Ms. Clemens. Mr. Smith.

MR. SMITH: May it please the Court, Your Honors, my name is Thomas Smith, and I am an associate at Damon & Morey in Buffalo. We represent Lake Shore Hospital and James B. Foster in this action. The issue in this case under Section 1981, Doctor Hodge has to show intentional discrimination to state a cause of action. Now, because there is no state action, and, as Ms. Clemens explained, he cannot show a 1981 cause of action, he cannot recover under 1985, and therefore, the claim under 1986 also fails. Now, Doctor Hodge has made numerous --

JUDGE PRATT: Do you buy that?

MR. SMITH: Excuse me?

JUDGE PRATT: Do you buy that, that you have not got

state action, therefore, the claim is no good under 1985?

MR. SMITH: I am sorry, Your Honor, I could not hear you.

JUDGE PRATT: Do you buy that argument that you are advancing?

MR. SMITH: Yes, Your Honor.

JUDGE PRATT: You'd better go back and read Griffin against Breckenridge. It clearly says that the 14th Amendment and the 13th Amendment are alternative bases for claims under 1985 when you have racial discrimination.

MR. SMITH: Well, Your Honor, the 14th Amendment would require state action.

JUDGE PRATT: I understand that, but the 13th does not.

MR. SMITH: But the 13th Amendment has at no point been argued in this case, and it hasn't been pled by the Plaintiff.

JUDGE MINER: It is still there if he pleads 1985.

JUDGE PRATT: He pleads racial discrimination.

MR. SMITH: Well, he would still need to show a conspiracy. He has put nothing -- any allegations that would support a conspiracy, and even in support of his own summary judgment motion, he has submitted no proof that would show a conspiracy, and that is what it comes down to here. He has numerous conclusory allegations, but there is nothing to support any of them. Because he cannot show any direct evidence of discriminatory intent under Section 1981, he has to use circumstantial evidence to create an inference of discriminatory intent.

JUDGE PRATT: What did the district court have before it when it made its determination on the summary judgment?

MR. SMITH: Before the district court was, I would say, the pleadings, the Plaintiff's lengthy affidavit, which was submitted along with his complaint, and the Plaintiff also submitted a memorandum of law containing some factual allegations.

JUDGE ALTIMARI: What did the Defendant interpose?

MR. SMITH: The Defendants put -- there was an affidavit from James B. Foster, and an affidavit was submitted on behalf of Doctor Cardamone.

JUDGE MINER: Are there pendant state claims pleaded?

MR. SMITH: Enough facts have not been alleged to sustain pendant state claims, and they have not been argued at any point in this case. Plaintiff has not made any argument about pendant state claims.

JUDGE MINER: The complaint says pendant jurisdiction is also invoked as derived from a common nucleus of operative facts.

MR. SMITH: But there are no claims, Your Honor, within the complaint, and at no point --

JUDGE MINER: You represent the hospital, don't you?

MR. SMITH: Yes.

JUDGE MINER: Doesn't he charge the hospital with failure to comply with its bylaws?

MR. SMITH: Yes, Your Honor.

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JUDGE MINER: Is that a state claim, a pendant claim?

MR. SMITH: Well, whether that would sufficiently state a state claim at this point, I don't know, but if his federal claims do not stand, then this case is properly dismissed anyway, and he cannot --

JUDGE MINER: That's a discretionary matter with the district court, isn't it?

MR. SMITH: Well, if his federal claims have all been dismissed, then he no longer has any basis for pendant jurisdiction.

JUDGE MINER: Well, United Mine Workers against Gibbs says that that is a discretionary matter, doesn't it?

JUDGE PRATT: Not only that, but we've got a new statute, a supplemental jurisdiction, which --

JUDGE MINER: That's right, we have a new statute that tells us to hang in with those cases.

MR. SMITH: Well, Your Honor, again, it is our feeling that any state claims have not been properly pled in this case, and it has not been argued at any point up until now.

JUDGE PRATT: He argued among -- his oral argument here, he says he is discharged without a hearing as required by their bylaws.

MR. SMITH: Well, the issues in the case, Your Honor, have all dealt with Sections 1981, 1985, and 1986.

JUDGE MINER: Why do you keep saying that, when he has plead this pendant state claim for bylaw violation, that is what we are talking to you about, he has argued it here, he has discussed it in his papers, what more can he do, other than have

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it tried as a matter of fact, whether there was a violation?

MR. SMITH: Well, Your Honor, if there are --

JUDGE MINER: We talk about that as a triable issue.

MR. SMITH: Well, Your Honor, if there are pendant state claims which have been properly pled, then certainly those claims would have to go back to the district court to be determined, because nothing has happened on them to this point. Thank you.

JUDGE PRATT: Thank you, Mr. Smith. Ms. Fisher.

MS. FISHER: Thank you, Your Honor.

I am Cheryl Smith Fisher from Magavern & Magavern and I represent Appellee Stat Services and Doctor Feldman. I am here today to speak about the sanctions issue. I would like to digress just a moment on the question of whether a properly pleaded claim was made as far as violations of the bylaws are concerned. That is a very difficult claim to make out under New York State law, and it does require appeal to the Public Health Council in most cases. There were no allegations that such an appeal was taken.

JUDGE MINER: You mean to tell me that you cannot assert a claim against a hospital, a physician cannot assert a claim for failure to comply with the bylaws in connection with his dismissal, unless he has first exhausted some administrative remedy?

MS. FISHER: Yes, Your Honor, in most cases, that is true.

JUDGE PRATT: That might be a good reason not to exercise pendant jurisdiction, and discretion and remand it to the state court, or let state court proceedings proceed, but go ahead.

MS. FISHER: Okay. On the question of sanctions in this

case, Rule 11 is, of course, to discourage abuses of the legal system. Doctor Hodge has abused the legal system in my opinion in this case. Particularly what started the question of sanctions was his cross motion for summary judgment, which he said he made as a cross motion to the motion to dismiss that was made by the Defendants, based on the fact that the Defendants' papers said that for purposes of a motion to dismiss, all of the allegations made by the Plaintiff have to be taken as true.

Well, yes, that is the case, but then Doctor Hodge turned around and said -- and he was at that point represented by counsel also, he turned around and said, well then, that means that I should win a motion for summary judgment because they have admitted that everything is true. Even if we had admitted that everything was true, Your Honor, according to Judge Curtin's opinion of the record, he still had not come up -- alleged enough to show a colorable claim of discrimination, but in any event, that is not the rule, that is not the intent of that statement.

Under the Eastway case, this was not a good faith argument for the extension of law, and Doctor Hodge then proceeded with an interlocutory appeal here against the advice of the clerk, and against the relatively clear meaning of Judge Curtin's order. We have had to --

JUDGE MINER: Well, rather than arguing sanctions, maybe we ought to talk a little bit about the merits of the claim against your client. Your client employed Doctor Hodge, is that right?

MR. SMITH: That's correct, your Honor.

JUDGE MINER: Your client is charged with acting with some of the other Defendants to interfere with the contractual relations or -- not the contractual relations necessarily, but the right of Doctor Hodge to be employed in the emergency room. Is that some kind of a claim against your client?

MS. FISHER: You mean if he attempts to state that claim

against my client?

JUDGE MINER: Yes.

MS. FISHER: Yes, I believe he has. He cannot claim against my client a violation of bylaws, because my client was not the hospital.

JUDGE MINER: He certainly can claim breach of contract against your client.

MS. FISHER: He could, but I don't see that he has stated that anywhere, Your Honor.

JUDGE PRATT: Thank you, Ms. Fisher. Thank you all. We will reserve decision. Doctor Hodge, you will be notified of the result of our decision.

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I hereby state that the foregoing is a true and accurate transcript of the minutes of this hearing, to the best of my ability.

NEIL M. SEFF - Hearing Reporter

